

Department of Health Care Services

Medi-Cal Specialty Mental Health Services

November Estimate

Policy Change Supplement

For Fiscal Years

2019-20 and 2020-21

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Executive Summary

The Medi-Cal Specialty Mental Health Services (SMHS) Supplement is required by Welfare and Institutions Code, Section 14100.51, to be submitted to the Legislature each year, by January 10 and concurrently with the release of the May Revision. This supplemental information provides children and adults caseloads and FY 2019-20 and FY 2020-21 forecasts by service type, explanations of changes to these forecasts, fiscal charts containing children and adults claim costs and unduplicated client counts, and summary fiscal charts for the current-year and budget-year.

Specialty Mental Health Services, PC 71 and 72

Continued growth is forecasted for both children and adult services. Children's service costs are projected to be \$2.213 billion for the current year and grow by 4.02% to \$2.302 billion for budget year. The unduplicated number of children receiving Specialty Mental Health Services from Short-Doyle Medi-Cal (SD/MC) and the unduplicated number of children receiving Fee-For-Service Medi-Cal (FFS/MC) is projected to grow 1.6% from 303,360 in the current year to 308,218 in the budget year.

Adult services are also expected to grow 7.32% from a current year projection of \$2.336 billion to a budget year projection of \$2.507 billion in budget year. The unduplicated number of adults receiving Specialty Mental Health Services through SD/MC providers and the unduplicated number of adults receiving Specialty Mental Health Services through FFS/MC providers is projected to increase 3.3% from 387,518 in the current year to 400,347 in the budget year. These numbers include claims from the Affordable Care Act (ACA) optional expansion.

Medi-Cal Specialty Mental Health Service Descriptions

Overview

The Medi-Cal Specialty Mental Health Services Program is “carved-out” of the broader Medi-Cal program and is also administered by the Department of Health Care Services (Department) under the authority of a 1915(b) waiver approved by the Centers for Medicare and Medicaid Services (CMS). The Department contracts with a Mental Health Plan (MHP) in each county to provide or arrange for the provision of Medi-Cal Specialty Mental Health Services. All MHPs are county mental health departments.

Specialty Mental Health Services are Medi-Cal entitlement services for adults and children that meet medical necessity criteria, which consist of having a specific covered diagnosis, functional impairment, and meeting intervention criteria. MHPs must certify they incurred a cost before seeking federal reimbursement through claims to the Department. MHPs are primarily responsible for the non-federal share of Medi-Cal Specialty Mental Health Services. Mental health services for Medi-Cal beneficiaries who do not meet the medical necessity criteria for Specialty Mental Health Services are provided under the broader Medi-Cal program either through managed care plans (by primary care providers within their scope of practice) or fee-for-service. Children’s Specialty Mental Health Services are provided under the federal requirements of the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) benefit, which is available to full-scope beneficiaries under age 21.

The following Medi-Cal Specialty Mental Health Services are provided for children¹ and adults²:

<u>Services</u>	<u>Children</u>	<u>Adult</u>
Adult Crisis Residential Services ³	X	X
Adult Residential Treatment Services ³	X	X
Crisis Intervention	X	X
Crisis Stabilization	X	X
Day Rehabilitation	X	X
Day Treatment Intensive	X	X
Intensive Care Coordination ³	X	
Intensive Home Based Services	X	
Medication Support	X	X
Psychiatric Health Facility Services	X	X
Psychiatric Inpatient Hospital Services	X	X
Targeted Case Management	X	X
Therapeutic Behavioral Services	X	
Therapy and Other Service Activities	X	X

Adult Crisis Residential Services (CRS)

Adult crisis residential services provide an alternative to acute psychiatric hospital services for beneficiaries who otherwise would require hospitalization. The Adult crisis residential programs provide normalized living environments, integrated into residential communities. The services follow a social rehabilitation model that integrates aspects of emergency psychiatric care, psychosocial rehabilitation, milieu therapy, case management and practical social work.

Adult Residential Treatment Services

Adult Residential Treatment Services are rehabilitative services provided in a non-institutional, residential setting for beneficiaries who would be at risk of hospitalization or other institutional placement if they were not receiving residential treatment services. The services include a wide range of activities and services that support beneficiaries in their effort to restore, maintain, and apply interpersonal and independent living skills and to access community support systems. Service activities may include assessment, plan development, therapy, rehabilitation, and collateral.

¹ Children include beneficiaries from birth through age 20.

² Adults include beneficiaries who are 21 and older.

³ Includes children who are 18 through 20.

Crisis Intervention

Crisis intervention services last less than 24 hours and are for, or on behalf of, a beneficiary for a condition that requires more timely response than a regularly scheduled visit. Service activities include, but are not limited to, assessment, collateral and therapy. Crisis Intervention services may either be face-to-face or by telephone with the beneficiary or the beneficiary's significant support person and may be provided anywhere in the community.

Crisis Stabilization

Crisis stabilization services last less than 24 hours and are for, or on behalf of, a beneficiary for a condition that requires a timelier response than a regularly scheduled visit. Service activities include but are not limited to one or more of the following: assessment, collateral, and therapy.

Day Rehabilitation (Half-Day & Full-Day)

Day rehabilitation services are a structured program of rehabilitation and therapy with services to improve, maintain or restore personal independence and functioning, consistent with requirements for learning and development and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to assessment, plan development, therapy, rehabilitation and collateral.

Day Treatment Intensive (Half-Day & Full-Day)

Day treatment intensive services are a structured, multi-disciplinary program of therapy that may be used as an alternative to hospitalization, or to avoid placement in a more restrictive setting, or to maintain the client in a community setting and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to, assessment, plan development, therapy, rehabilitation and collateral.

Intensive Care Coordination

Intensive Care Coordination (ICC) is a targeted case management service that facilitates assessment of, care planning for and coordination of services to beneficiaries under age 21 who are eligible for the full scope of Medi-Cal services and who meet medical necessity criteria for this service. ICC service components include: assessing; service planning and implementation; monitoring and adapting; and transition. ICC services are provided through the principles of the Core Practice Model (CPM), including the establishment of the Child and Family Team (CFT) to facilitate a collaborative

relationship among a youth, his/her family and involved child-serving systems to allow the child/youth to be served in his/her community. The CFT is comprised of, as appropriate, both formal supports, such as the ICC coordinator, providers, case managers from child-serving agencies, and natural supports, such as family members, neighbors, friends, and clergy and all ancillary individuals who work together to develop and implement the client plan and are responsible for supporting the child/youth and family in attaining their goals.

Intensive Home Based Services

Intensive Home Based Services (IHBS) are individualized, strength-based interventions designed to ameliorate mental health conditions that interfere with a child/youth's functioning and are aimed at helping the child/youth build skills necessary for successful functioning in the home and community and improving the child/youth's family's ability to help the child/youth successfully function in the home and community. IHBS services are provided according to an individualized treatment plan developed in accordance with the Core Practice Model (CPM) by the Child and Family Team (CFT) in coordination with the family's overall service plan which may include IHBS. Service activities may include, but are not limited to assessment, plan development, therapy, rehabilitation and collateral. IHBS is provided to beneficiaries under 21 who are eligible for the full scope of Medi-Cal services and who meet medical necessity criteria for this service.

Medication Support

Medication support services include prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals that are necessary to alleviate the symptoms of mental illness. Service activities may include but are not limited to: evaluation of the need for medication; evaluation of clinical effectiveness and side effects; obtaining informed consent; instruction in the use, risks and benefits of, and alternatives for, medication; collateral and plan development related to the delivery of service and/or assessment for the client; prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals; and medication education.

Psychiatric Health Facility (PHF) Services

A Psychiatric Health Facility is a facility licensed under the provisions of Chapter 9, Division 5, Title 22 of the California Code of Regulations. "Psychiatric Health Facility Services" are therapeutic and/or rehabilitative services provided in a psychiatric health facility on an inpatient basis to beneficiaries who need acute care, which meets the criteria of Section 1820.205 of Chapter 11, Division 1, Title 9 of the California Code of Regulations, and whose physical health needs can be met in an affiliated general acute care hospital or in outpatient settings. These services are separate from those categorized as "Psychiatric Inpatient Hospital".

Psychiatric Inpatient Hospital Services

Psychiatric inpatient hospital services include both acute psychiatric inpatient hospital services and administrative day services. Acute psychiatric inpatient hospital services are provided to beneficiaries for whom the level of care provided in a hospital is medically necessary to diagnose or treat a covered mental illness. Administrative day services are inpatient hospital services provided to beneficiaries who were admitted to the hospital for an acute psychiatric inpatient hospital service and the beneficiary's stay at the hospital must be continued beyond the beneficiary's need for acute psychiatric inpatient hospital services due to lack of residential placement options at non-acute residential treatment facilities that meet the needs of the beneficiary.

Psychiatric inpatient hospital services are provided by SD/MC hospitals and FFS/MC hospitals. MHPs claim reimbursement for the cost of psychiatric inpatient hospital services provided by SD/MC hospitals through the SD/MC claiming system. FFS/MC hospitals claim reimbursement for the cost of psychiatric inpatient hospital services through the Fiscal Intermediary. MHPs are responsible for authorization of psychiatric inpatient hospital services reimbursed through either billing system. For SD/MC hospitals, the daily rate includes the cost of any needed professional services. The FFS/MC hospital daily rate does not include professional services, which are billed separately from the FFS/MC inpatient hospital services via the SD/MC claiming system.

Targeted Case Management

Targeted case management (TCM) is a service that assists a beneficiary in accessing needed medical, educational, social, prevocational, vocational, rehabilitative, or other community services. The service activities may include, but are not limited to: communication, coordination and referral; monitoring service delivery to ensure beneficiary access to services and the service delivery system; monitoring of the beneficiary's progress; placement services; and plan development. TCM services may be face-to-face or by telephone with the client or significant support persons and may be provided anywhere in the community. Additionally, services may be provided by any person determined by the MHP to be qualified to provide the service, consistent with the scope of practice and state law.

Therapeutic Behavioral Services

Therapeutic behavioral services (TBS) are intensive, individualized, short-term outpatient treatment interventions for beneficiaries up to age 21. Individuals receiving these services have serious emotional disturbances (SED), are experiencing a stressful transition or life crisis and need additional short-term, specific support services to accomplish outcomes specified in the written treatment plan.

Therapy and Other Service Activities (formerly referred to as Mental Health Services)

Individual or group therapies and interventions that are designed to provide a reduction of mental disability and restoration, improvement or maintenance of functioning consistent with the goals of learning, development, independent living, and enhanced self-sufficiency. These services are separate from those provided as components of adult residential services, crisis intervention, crisis stabilization, day rehabilitation, or day treatment intensive. Service activities may include, but are not limited to:

1. Assessment - A service activity designed to evaluate the current status of mental, emotional, or behavioral health. Assessment includes, but is not limited to, one or more of the following: mental status determination, analysis of the clinical history, analysis of relevant cultural issues and history; diagnosis; and the use of mental health testing procedures.
2. Plan Development - A service activity that consists of development of client plans, approval of client plans, and/or monitoring and recording of progress.
3. Therapy - A service activity that is a therapeutic intervention focusing primarily on symptom reduction as a means to reduce functional impairments. Therapy may be delivered to an individual or group and may include family therapy at which the client is present.
4. Rehabilitation - A service activity that includes, but is not limited to assistance improving, maintaining or restoring functional skills, daily living skills, social and leisure skills, grooming and personal hygiene skills, meal preparation skills and support resources; and/or medication education.
5. Collateral - A service activity involving a significant support person in the beneficiary's life for the purpose of addressing the mental health needs of the beneficiary in terms of achieving goals of the beneficiary's client plan. Collateral may include, but is not limited to consultation and training of the significant support person(s) to assist in better utilization of mental health services by the client, consultation and training of the significant support person(s) to assist in better understanding of mental illness, and family counseling with the significant support person(s) in achieving the goals of the client plan. The client may or may not be present for this service activity.

The distribution and use of expenditures of each service activity varies over time with changes in client needs.

Litigation and the Specialty Mental Health Services Program

Katie A. v. Bonta

The Katie A. v. Bonta lawsuit Settlement Agreement, which was in effect from December 2011 through December 2014, outlined a series of actions that were intended to transform the way children and youth who are in foster care or who are at imminent risk of foster care placement receive access to mental health services consistent with a Core Practice Model (CPM) that creates a coherent and all-inclusive approach to service planning and delivery. The Settlement Agreement also specified that children and youth who meet subclass criteria (as defined in the Settlement Agreement) are eligible to receive Intensive Care Coordination (ICC), Intensive Home Based Services (IHBS), and Therapeutic Foster Care (TFC). County MHPs are obligated to provide ICC, IHBS, and TFC through the EPSDT benefit to all children and youth under the age of 21 who are eligible for full scope Medi-Cal benefits and who meet medical necessity criteria for these services. MHPs provide ICC and IHBS and claim federal reimbursement through the SDMC claiming system.

The Department's Mental Health Services Division (MHSD) Information Notice 13-11 instructed counties of the SDMC system changes required to support the implementation of ICC and IHBS which included submitting claims with a Demonstration Project Identifier (DPI) of "KTA" and procedure codes (T1017, HK) for Intensive Care Coordination and (H2015, HK) for Intensive Home Based Services. The Department's Mental Health and Substance Disorder Services (MHSUDS) Information Notice 17-021 instructed counties of the SD/MC system changes required to support the implementation of TFC Services. While the Katie A. Settlement concerned children and youth in foster care or at imminent risk of placement in foster care, membership in the Katie A. class or subclass is not a prerequisite for receiving medically necessary ICC, IHBS, and TFC and other related services for EPSDT-eligible children.

MHPs began billing for ICC and IHBS services for dates of service starting January 1, 2013. This November budget estimate contains actual claims data for ICC and IHBS claims received through June 30, 2019. The TFC services model was implemented on January 1, 2017.

Emily Q. v. Bonta

In 1998, a federal class action lawsuit, Emily Q. v. Bonta was filed with the Federal District Court on behalf of children with intensive mental health needs and who were eligible for Medi-Cal mental health benefits, but were denied specific Therapeutic Behavioral Services (TBS). In 2001, the district court issued a permanent injunction favoring the plaintiffs and in 2004, the court approved a plan to increase the usage of TBS including increased monitoring and a special master was appointed.

TBS is a short-term, intensive one-to-one behavioral mental health intervention that can help children, youth, parents, caregivers, and school personnel learn new ways of reducing and managing challenging behaviors. TBS can avert the need for a higher level of care (or more restrictive placement) or help a child make a successful transition to a lower level of care.

Children (In thousands)								
POLICY CHANGE			May 2019 Est for FY 2019-20		November 2019 Est for FY 2019-20		DIFFERENCE	
TYPE	NO.	DESCRIPTION	GF	FFP	GF	FFP	GF	FFP
Base	71 ⁽⁴⁾	SMHS FOR ADULTS	\$0	\$0	\$0	\$0	\$0	\$0
Base	72 ⁽⁴⁾	SMHS FOR CHILDREN	\$96,577	\$1,227,139	\$97,277	\$1,196,177	\$700	(\$30,962)
Regular	73	SPECIALTY MH SVCS SUPP REIMBURSEMENT	\$0	\$51,503	\$0	\$60,967	\$0	\$9,464
Regular	74	MHP COSTS FOR CONTINUUM OF CARE REFORM	\$11,661	\$10,032	\$12,044	\$10,371	\$383	\$339
Regular	75	PATHWAYS TO WELL -BEING	\$0	\$20,452	\$0	\$448	\$0	(\$20,004)
Regular	76	LATE CLAIMS FOR SMHS	\$104	\$0	\$473	\$0	\$369	\$0
Regular	77	SISKIYOU COUNTY MH PLAN OVERPAYMENT	\$0	\$0	\$0	\$0	\$0	\$0
Regular	79	CHART REVIEW	\$0	(\$375)	\$0	(\$356)	\$0	\$19
Regular	80	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$6,183	\$4,716	\$5,139	(\$84,437)	(\$1,044)	(\$89,153)
Regular	206	IMD ANCILLARY SERVICES	\$0	\$0	\$0	\$0	\$0	\$0
N/A	N/A ⁽⁵⁾	RECOUPMENT OF SMHS AUDIT SETTLEMENT	(\$22,586)	\$0	\$0	\$0	\$22,586	\$0
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$0	\$8,213	\$0	\$6,818	\$0	(\$1,395)
Other	6	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$0	\$1,939	\$0	\$23,718	\$0	\$21,779
Other	11	SMHS COUNTY UR & QA ADMIN	\$433	\$12,705	\$588	\$18,858	\$155	\$6,153
Other	13	SMH MAA	\$0	\$14,569	\$0	\$17,522	\$0	\$2,953
Other	15	MANAGED CARE REGULATIONS - MENTAL HEALTH	\$2,556	\$5,108	\$2,351	\$4,698	(\$205)	(\$410)
Other	16	MANAGED CARE REGULATIONS - MH PARITY	\$873	\$5,241	\$857	\$5,140	(\$16)	(\$101)
Other	19	PERFORMANCE OUTCOMES SYSTEM	\$3,462	\$4,624	\$3,129	\$3,957	(\$333)	(\$667)
Total Children			\$99,263	\$1,365,866	\$121,858	\$1,263,881	\$22,595	(\$101,985)

⁴ The GF amounts for PC 71 and PC 72 are reimbursements for psychiatric inpatient hospital services billed to the Fiscal Intermediary and specialty mental health services provided to beneficiaries enrolled in ACA aid codes.

⁵ Policy Change marked **NA - Recoupment of SMHS Audit Settlement (previously PC 210)** is longer active

Adults			(In thousands)					
POLICY CHANGE			May 2019 Est for FY 2019-20		November 2019 Est for FY 2019-20		DIFFERENCE	
TYPE	NO.	DESCRIPTION	GF	FFP	GF	FFP	GF	FFP
Base	71 ⁽⁶⁾	SMHS FOR ADULTS	\$146,587	\$1,560,626	\$138,285	\$1,493,031	(\$8,302)	(\$67,595)
Base	72 ⁽⁶⁾	SMHS FOR CHILDREN	\$0	\$0	\$0	\$0	\$0	\$0
Regular	73	SPECIALTY MH SVCS SUPP REIMBURSEMENT	\$0	\$62,588	\$0	\$76,345	\$0	\$13,757
Regular	74	MHP COSTS FOR CONTINUUM OF CARE REFORM	\$0	\$0	\$0	\$0	\$0	\$0
Regular	75	PATHWAYS TO WELL -BEING	\$0	\$0	\$0	\$0	\$0	\$0
Regular	76	LATE CLAIMS FOR SMHS	\$103	\$0	\$560	\$0	\$457	\$0
Regular	77	SISKIYOU COUNTY MH PLAN OVERPAYMENT			\$0	\$0	\$0	\$0
Regular	79	CHART REVIEW	\$0	(\$1,119)	\$0	(\$755)	\$0	\$364
Regular	80	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$0	\$4,666	\$0	(\$73,278)	\$0	(\$77,944)
Regular	206	IMD ANCILLARY SERVICES	\$25,777	(\$25,777)	\$17,100	(\$17,100)	(\$8,677)	\$8,677
N/A	N/A ⁽⁷⁾	RECOUPMENT OF SMHS AUDIT SETTLEMENT	(\$22,586)	\$0	\$0	\$0	\$22,586	\$0
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$0	\$136,463	\$0	\$122,581	\$0	(\$13,882)
Other	6	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$0	\$1,173	\$0	\$19,555	\$0	\$18,382
Other	11	SMHS COUNTY UR & QA ADMIN	\$550	\$16,170	\$355	\$11,412	(\$195)	(\$4,758)
Other	13	SMH MAA	\$0	\$14,570	\$0	\$10,739	\$0	(\$3,831)
Other	15	MANAGED CARE REGULATIONS - MENTAL HEALTH	\$5,111	\$10,230	\$4,703	\$9,410	(\$408)	(\$820)
Other	16	MANAGED CARE REGULATIONS - MH PARITY	\$1,920	\$11,518	\$1,906	\$11,441	(\$14)	(\$77)
Other	19	PERFORMANCE OUTCOMES SYSTEM	\$3,327	\$4,442	\$3,932	\$4,971	\$605	\$529
Total Adults			\$160,789	\$1,795,550	\$166,841	\$1,668,352	\$6,052	(\$127,198)

⁶ The GF amounts for PC 71 and PC 72 are reimbursements for psychiatric inpatient hospital services billed to the Fiscal Intermediary and specialty mental health services provided to beneficiaries enrolled in ACA aid codes.

⁷ Policy Change marked **NA - Recoupment of SMHS Audit Settlement (previously PC 210)** is longer active

Healthy Families Program			(In thousands)					
<u>POLICY CHANGE</u>			May 2019 Est for FY 2019-20		November 2019 Est for FY 2019-20		DIFFERENCE	
TYPE	NO.	DESCRIPTION	GF	FFP	GF	FFP	GF	FFP
Base	71	SMHS FOR ADULTS	\$0	\$0	\$0	\$0	\$0	\$0
Base	72	SMHS FOR CHILDREN	\$0	\$0	\$0	\$0	\$0	\$0
Regular	73	SPECIALTY MH SVCS SUPP REIMBURSEMENT	\$0	\$0	\$0	\$0	\$0	\$0
Regular	74	MHP COSTS FOR CONTINUUM OF CARE REFORM	\$0	\$0	\$0	\$0	\$0	\$0
Regular	75	PATHWAYS TO WELL -BEING	\$0	\$0	\$0	\$0	\$0	\$0
Regular	76	LATE CLAIMS FOR SMHS	\$0	\$0	\$0	\$0	\$0	\$0
Regular	77	SISKIYOU COUNTY MH PLAN OVERPAYMENT	\$0	\$0	\$0	\$0	\$0	\$0
Regular	79	CHART REVIEW	\$0	\$0	\$0	\$0	\$0	\$0
Regular	80	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$0	\$51	\$0	(\$2,577)	\$0	(\$2,628)
Regular	206	IMD ANCILLARY SERVICES	\$0	\$0	\$0	\$0	\$0	\$0
N/A	N/A	RECOUPMENT OF SMHS AUDIT SETTLEMENT	\$0	\$0	\$0	\$0	\$0	\$0
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$0	\$0	\$0	\$0	\$0	\$0
Other	6	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$0	\$68	\$0	(\$69)	\$0	(\$137)
Other	13	SMH MAA	\$0	\$0	\$0	\$0	\$0	\$0
Other	11	SMHS COUNTY UR & QA ADMIN	\$0	\$0	\$0	\$0	\$0	\$0
Other	15	MANAGED CARE REGULATIONS - MENTAL HEALTH	\$0	\$0	\$0	\$0	\$0	\$0
Other	16	MANAGED CARE REGULATIONS - MH PARITY	\$0	\$0	\$0	\$0	\$0	\$0
Other	19	PERFORMANCE OUTCOMES SYSTEM	\$0	\$0	\$0	\$0	\$0	\$0
Total Healthy Families Program			\$0	\$119	\$0	(\$2,646)	\$0	(\$2,765)

Grand Total		(In thousands)						
<u>POLICY CHANGE</u>			May 2019 Est for FY 2019-20		November 2019 Est for FY 2019-20		DIFFERENCE	
TYPE	NO.	DESCRIPTION	GF	FFP	GF	FFP	GF	FFP
Base	71 ⁽⁸⁾	SMHS FOR ADULTS	\$146,587	\$1,560,626	\$138,285	\$1,493,031	(\$8,302)	(\$67,595)
Base	72 ⁽⁸⁾	SMHS FOR CHILDREN	\$96,577	\$1,227,139	\$97,277	\$1,196,177	\$700	(\$30,962)
Regular	73	SPECIALTY MH SVCS SUPP REIMBURSEMENT	\$0	\$114,091	\$0	\$137,312	\$0	\$23,221
Regular	74	MHP COSTS FOR CONTINUUM OF CARE REFORM	\$11,661	\$10,032	\$12,044	\$10,371	\$383	\$339
Regular	75	PATHWAYS TO WELL -BEING	\$0	\$20,452	\$0	\$448	\$0	(\$20,004)
Regular	76	LATE CLAIMS FOR SMHS	\$207	\$0	\$1,033	\$0	\$826	\$0
Regular	77	SISKIYOU COUNTY MH PLAN OVERPAYMENT	\$0	\$0	\$0	\$0	\$0	\$0
Regular	79	CHART REVIEW	\$0	(\$1,494)	\$0	(\$1,111)	\$0	\$383
Regular	80	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$6,183	\$9,433	\$5,139	(\$160,292)	(\$1,044)	(\$169,725)
Regular	206	IMD ANCILLARY SERVICES	\$25,777	(\$25,777)	\$17,100	(\$17,100)	(\$8,677)	\$8,677
N/A	N/A ⁽⁹⁾	RECOUPMENT OF SMHS AUDIT SETTLEMENT	(\$45,172)	\$0	\$0	\$0	\$45,172	\$0
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$0	\$144,676	\$0	\$129,399	\$0	(\$15,277)
Other	6	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$0	\$3,180	\$0	\$43,204	\$0	\$40,024
Other	13	SMH MAA	\$0	\$29,139	\$0	\$28,261	\$0	(\$878)
Other	11	SMHS COUNTY UR & QA ADMIN	\$983	\$28,875	\$943	\$30,270	(\$40)	\$1,395
Other	15	MANAGED CARE REGULATIONS - MENTAL HEALTH	\$7,667	\$15,338	\$7,054	\$14,108	(\$613)	(\$1,230)
Other	16	MANAGED CARE REGULATIONS - MH PARITY	\$2,793	\$16,759	\$2,763	\$16,581	(\$30)	(\$178)
Other	19	PERFORMANCE OUTCOMES SYSTEM	\$6,789	\$9,066	\$7,061	\$8,928	\$272	(\$138)
Grand Total			\$260,052	\$3,161,535	\$288,699	\$2,929,587	\$28,647	(\$231,948)

⁸ The GF amounts for PC 71 and PC 72 are reimbursements for psychiatric inpatient hospital services billed to the Fiscal Intermediary and specialty mental health services provided to beneficiaries enrolled in ACA aid codes.

⁹ Policy Change marked **NA - Recoupment of SMHS Audit Settlement (previously PC 210)** is longer active

Children (In thousands)								
<u>POLICY CHANGE</u>			November 2019 Est for FY 2019-20		November 2019 Est for FY 2020-21		DIFFERENCE	
TYPE	NO.	DESCRIPTION	GF	FFP	GF	FFP	GF	FFP
Base	71 ⁽¹⁰⁾	SMHS FOR ADULTS	\$0	\$0	\$0	\$0	\$0	\$0
Base	72 ⁽¹⁰⁾	SMHS FOR CHILDREN	\$97,277	\$1,196,177	\$111,589	\$1,214,837	\$14,312	\$18,660
Regular	73	SPECIALTY MH SVCS SUPP REIMBURSEMENT	\$0	\$60,967	\$0	\$0	\$0	(\$60,967)
Regular	74	MHP COSTS FOR CONTINUUM OF CARE REFORM	\$12,044	\$10,371	\$12,194	\$10,522	\$150	\$151
Regular	75	PATHWAYS TO WELL -BEING	\$0	\$448	\$0	\$484	\$0	\$36
Regular	76	LATE CLAIMS FOR SMHS	\$473	\$0	\$0	\$0	(\$473)	\$0
Regular	77	SISKIYOU COUNTY MH PLAN OVERPAYMENT	\$0	\$0	\$0	\$0	\$0	\$0
Regular	79	CHART REVIEW	\$0	(\$356)	\$0	(\$93)	\$0	\$263
Regular	80	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$5,139	(\$84,437)	\$0	\$0	(\$5,139)	\$84,437
Regular	206	IMD ANCILLARY SERVICES	\$0	\$0	\$0	\$0	\$0	\$0
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$0	\$6,818	\$0	\$7,431	\$0	\$613
Other	6	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$0	\$23,718	\$0	\$0	\$0	(\$23,718)
Other	11	SMHS COUNTY UR & QA ADMIN	\$588	\$18,858	\$415	\$13,596	(\$173)	(\$5,262)
Other	13	SMH MAA	\$0	\$17,522	\$0	\$15,167	\$0	(\$2,355)
Other	15	MANAGED CARE REGULATIONS - MENTAL HEALTH	\$2,351	\$4,698	\$2,351	\$4,698	\$0	\$0
Other	16	MANAGED CARE REGULATIONS - MH PARITY	\$857	\$5,140	\$864	\$5,185	\$7	\$45
Other	19	PERFORMANCE OUTCOMES SYSTEM	\$3,129	\$3,957	\$3,404	\$4,508	\$275	\$551
Total Children			\$121,858	\$1,263,881	\$130,817	\$1,276,335	\$8,959	\$12,454

¹⁰ The GF amounts for PC 71 and PC 72 are reimbursements for psychiatric inpatient hospital services billed to the Fiscal Intermediary and specialty mental health services provided to beneficiaries enrolled in ACA aid codes.

Adults		(In thousands)						
<u>POLICY CHANGE</u>			November 2019 Est for FY 2019-20		November 2019 Est for FY 2020-21		DIFFERENCE	
TYPE	NO.	DESCRIPTION	GF	FFP	GF	FFP	GF	FFP
Base	71 ⁽¹¹⁾	SMHS FOR ADULTS	\$138,285	\$1,493,031	\$166,901	\$1,615,649	\$28,616	\$122,618
Base	72 ⁽¹¹⁾	SMHS FOR CHILDREN	\$0	\$0	\$0	\$0	\$0	\$0
Regular	73	SPECIALTY MH SVCS SUPP REIMBURSEMENT	\$0	\$76,345	\$0	\$0	\$0	(\$76,345)
Regular	74	MHP COSTS FOR CONTINUUM OF CARE REFORM	\$0	\$0	\$0	\$0	\$0	\$0
Regular	75	PATHWAYS TO WELL -BEING	\$0	\$0	\$0	\$0	\$0	\$0
Regular	76	LATE CLAIMS FOR SMHS	\$560	\$0	\$0	\$0	(\$560)	\$0
Regular	77	SISKIYOU COUNTY MH PLAN OVERPAYMENT	\$0	\$0	\$0	\$0	\$0	\$0
Regular	79	CHART REVIEW	\$0	(\$755)	\$0	(\$278)	\$0	\$477
Regular	80	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$0	(\$73,278)	\$0	\$0	\$0	\$73,278
Regular	206	IMD ANCILLARY SERVICES	\$17,100	(\$17,100)	\$13,392	(\$13,392)	(\$3,708)	\$3,708
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$0	\$122,581	\$0	\$123,470	\$0	\$889
Other	6	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$0	\$19,555	\$0	\$0	\$0	(\$19,555)
Other	11	SMHS COUNTY UR & QA ADMIN	\$355	\$11,412	\$528	\$17,304	\$173	\$5,892
Other	13	SMH MAA	\$0	\$10,739	\$0	\$15,168	\$0	\$4,429
Other	15	MANAGED CARE REGULATIONS - MENTAL HEALTH	\$4,703	\$9,410	\$4,703	\$9,410	\$0	\$0
Other	16	MANAGED CARE REGULATIONS - MH PARITY	\$1,906	\$11,441	\$1,899	\$11,396	(\$7)	(\$45)
Other	19	PERFORMANCE OUTCOMES SYSTEM	\$3,932	\$4,971	\$3,271	\$4,332	(\$661)	(\$639)
Total Adults			\$166,841	\$1,668,352	\$190,694	\$1,783,059	\$23,853	\$114,707

¹¹ The GF amounts for PC 71 and PC 72 are reimbursements for psychiatric inpatient hospital services billed to the Fiscal Intermediary and specialty mental health services provided to beneficiaries enrolled in ACA aid codes.

Healthy Families Program			(In thousands)					
<u>POLICY CHANGE</u>			November 2019 Est for FY 2019-20		November 2019 Est for FY 2020-21		DIFFERENCE	
TYPE	NO.	DESCRIPTION	GF	FFP	GF	FFP	GF	FFP
Base	71	SMHS FOR ADULTS	\$0	\$0	\$0	\$0	\$0	\$0
Base	72	SMHS FOR CHILDREN	\$0	\$0	\$0	\$0	\$0	\$0
Regular	73	SPECIALTY MH SVCS SUPP REIMBURSEMENT	\$0	\$0	\$0	\$0	\$0	\$0
Regular	74	MHP COSTS FOR CONTINUUM OF CARE REFORM	\$0	\$0	\$0	\$0	\$0	\$0
Regular	75	PATHWAYS TO WELL -BEING	\$0	\$0	\$0	\$0	\$0	\$0
Regular	76	LATE CLAIMS FOR SMHS	\$0	\$0	\$0	\$0	\$0	\$0
Regular	77	SISKIYOU COUNTY MH PLAN OVERPAYMENT	\$0	\$0	\$0	\$0	\$0	\$0
Regular	79	CHART REVIEW	\$0	\$0	\$0	\$0	\$0	\$0
Regular	80	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$0	(\$2,577)	\$0	\$0	\$0	\$2,577
Regular	206	IMD ANCILLARY SERVICES	\$0	\$0	\$0	\$0	\$0	\$0
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$0	\$0	\$0	\$0	\$0	\$0
Other	6	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$0	(\$69)	\$0	\$0	\$0	\$69
Other	11	SMHS COUNTY UR & QA ADMIN	\$0	\$0	\$0	\$0	\$0	\$0
Other	13	SMH MAA	\$0	\$0	\$0	\$0	\$0	\$0
Other	15	MANAGED CARE REGULATIONS - MENTAL HEALTH	\$0	\$0	\$0	\$0	\$0	\$0
Other	16	MANAGED CARE REGULATIONS - MH PARITY	\$0	\$0	\$0	\$0	\$0	\$0
Other	19	PERFORMANCE OUTCOMES SYSTEM	\$0	\$0	\$0	\$0	\$0	\$0
Total Healthy Families Program			\$0	(\$2,646)	\$0	\$0	\$0	\$2,646

Grand Total		(In thousands)						
<u>POLICY CHANGE</u>			November 2019 Est for FY 2019-20		November 2019 Est for FY 2020-21		DIFFERENCE	
TYPE	NO.	DESCRIPTION	GF	FFP	GF	FFP	GF	FFP
Base	71 ⁽¹²⁾	SMHS FOR ADULTS	\$138,285	\$1,493,031	\$166,901	\$1,615,649	\$28,616	\$122,618
Base	72 ⁽¹²⁾	SMHS FOR CHILDREN	\$97,277	\$1,196,177	\$111,589	\$1,214,837	\$14,312	\$18,660
Regular	73	SPECIALTY MH SVCS SUPP REIMBURSEMENT	\$0	\$137,312	\$0	\$0	\$0	(\$137,312)
Regular	74	MHP COSTS FOR CONTINUUM OF CARE REFORM	\$12,044	\$10,371	\$12,194	\$10,522	\$150	\$151
Regular	75	PATHWAYS TO WELL -BEING	\$0	\$448	\$0	\$484	\$0	\$36
Regular	76	LATE CLAIMS FOR SMHS	\$1,033	\$0	\$0	\$0	(\$1,033)	\$0
Regular	77	SISKIYOU COUNTY MH PLAN OVERPAYMENT	\$0	\$0	\$0	\$0	\$0	\$0
Regular	79	CHART REVIEW	\$0	(\$1,111)	\$0	(\$371)	\$0	\$740
Regular	80	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$5,139	(\$160,292)	\$0	\$0	(\$5,139)	\$160,292
Regular	206	IMD ANCILLARY SERVICES	\$17,100	(\$17,100)	\$13,392	(\$13,392)	(\$3,708)	\$3,708
Other	3	COUNTY SPECIALTY MENTAL HEALTH ADMIN	\$0	\$129,399	\$0	\$130,901	\$0	\$1,502
Other	6	INTERIM AND FINAL COST SETTLEMENTS - SMHS	\$0	\$43,204	\$0	\$0	\$0	(\$43,204)
Other	11	SMHS COUNTY UR & QA ADMIN	\$943	\$30,270	\$943	\$30,900	\$0	\$630
Other	13	SMH MAA	\$0	\$28,261	\$0	\$30,335	\$0	\$2,074
Other	15	MANAGED CARE REGULATIONS - MENTAL HEALTH	\$7,054	\$14,108	\$7,054	\$14,108	\$0	\$0
Other	16	MANAGED CARE REGULATIONS - MH PARITY	\$2,763	\$16,581	\$2,763	\$16,581	(\$0)	(\$0)
Other	19	PERFORMANCE OUTCOMES SYSTEM	\$7,061	\$8,928	\$6,675	\$8,840	(\$386)	(\$88)
Grand Total			\$288,699	\$2,929,587	\$321,511	\$3,059,394	\$32,812	\$129,807

¹² The GF amounts for PC 71 and PC 72 are reimbursements for psychiatric inpatient hospital services billed to the Fiscal Intermediary and specialty mental health services provided to beneficiaries enrolled in ACA aid codes.

Children Services – Approved Claims Data

CHILDREN'S TABLE OF APPROVED CLAIM COSTS AND UNDUPLICATED CLIENT COUNTS							
	Fiscal Year	Approved Claims [13]&[14]) (In 1,000s)	Percentage Change in Claim Costs	Unduplicated Clients Receiving SMHS	Percent Growth in Clients	Cost Per Client	Percent Growth in Cost Per Client
Actual	2009-10	\$1,181,322	-0.13%	208,555	2.09%	\$5,664	-2.17%
Actual	2010-11	\$1,228,249	3.97%	214,487	2.84%	\$5,726	1.10%
Actual	2011-12	\$1,297,492	5.64%	227,959	6.28%	\$5,692	-0.61%
Actual	2012-13	\$1,500,019	15.61%	245,215	7.57%	\$6,117	7.47%
Actual	2013-14	\$1,601,548	6.77%	262,235	6.94%	\$6,107	-0.16%
Actual	2014-15	\$1,605,435	0.24%	264,241	0.76%	\$6,076	-0.52%
Actual	2015-16	\$1,624,064	1.16%	262,939	-0.49%	\$6,177	1.66%
Actual	2016-17	\$1,906,396	17.38%	264,646	0.65%	\$7,204	16.63%
Actual	2017-18	\$1,955,861	2.59%	271,983	2.77%	\$7,191	-0.17%
Forecast	2018-19	\$2,007,373	2.63%	283,660	4.29%	\$7,077	-1.59%
Forecast	2019-20	\$2,088,832	4.06%	287,832	1.47%	\$7,257	2.55%
Forecast	2020-21	\$2,170,290	3.90%	292,001	1.45%	\$7,432	2.42%

¹³ Actual Approved Claims SD/MC Data for Specialty Mental Health as of June 30, 2019.

¹⁴ Beginning with the May 2013 Estimate, all children's services (except FFS/MC inpatient services) are included in this table of approved claims for FY 2009-10 and on.

Children Services Approved Claims Data
Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts by Service
FY 2014-15 through FY 2017-18 utilizes actual data and
FY 2018-19 through FY 2020-21 utilizes weighted actual and forecast data
Actual Claims Data as of 6/30/2019

FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount
2014-15	884	11,237	12.71	\$815.60	\$ 9,164,947
2015-16	1,175	13,871	11.81	\$819.19	\$ 11,362,999
2016-17	1,142	13,497	11.82	\$1,118.34	\$ 15,094,296
2017-18	1,187	12,688	10.69	\$1,225.93	\$ 15,554,632
2018-19	1,286	13,006	10.11	\$1,334.25	\$ 17,353,399
2019-20	1,381	13,346	9.66	\$1,415.57	\$ 18,891,959
2020-21	1,477	13,613	9.22	\$1,443.33	\$ 19,647,637
Change	6.95%	2.00%	-4.55%	1.96%	4.00%

FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount
2014-15	373	7,272	19.50	\$335.43	\$ 2,439,242
2015-16	368	7,158	19.45	\$346.77	\$ 2,482,188
2016-17	380	6,561	17.27	\$357.22	\$ 2,343,727
2017-18	404	8,395	20.78	\$360.10	\$ 3,023,002
2018-19	454	8,429	18.57	\$360.34	\$ 3,037,261
2019-20	489	8,873	18.14	\$358.99	\$ 3,185,109
2020-21	508	9,050	17.81	\$366.03	\$ 3,312,513
Change	3.89%	2.00%	-1.85%	1.96%	4.00%

¹⁵ The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.

Children Services Approved Claims Data
Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts by Service
FY 2014-15 through FY 2017-18 utilizes actual data and
FY 2018-19 through FY 2020-21 utilizes weighted actual and forecast data
Actual Claims Data as of 6/30/2019

FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount
2014-15	82	7,096	86.54	\$173.50	\$ 1,231,153
2015-16	83	8,341	100.49	\$169.72	\$ 1,415,647
2016-17	76	6,709	88.28	\$176.65	\$ 1,185,171
2017-18	79	6,967	88.19	\$184.13	\$ 1,282,817
2018-19	98	6,658	67.94	\$188.98	\$ 1,258,258
2019-20	97	5,859	60.40	\$194.40	\$ 1,138,956
2020-21	91	5,976	65.67	\$198.21	\$ 1,184,514
Change	-6.19%	2.00%	8.73%	1.96%	4.00%

FY	Number of Clients	Number of Hours	Hours Per Client	Cost Per Hour	Approved Amount
2014-15	11,619	185,113	16	\$ 93.21	\$ 17,253,824
2015-16	12,265	215,680	18	\$ 97.20	\$ 20,965,091
2016-17	12,693	217,699	17	\$ 111.14	\$ 24,194,235
2017-18	13,838	243,446	18	\$ 113.85	\$ 27,715,320
2018-19	13,081	232,531	18	\$ 124.71	\$ 28,998,563
2019-20	13,728	247,764	18	\$ 124.40	\$ 30,820,696
2020-21	14,376	252,719	18	\$ 126.83	\$ 32,053,524
Change	4.72%	2.00%	0%	1.96%	4.00%

¹⁶ The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.

Children Services Approved Claims Data
Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts by Service
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Actual Claims Data as of 6/30/2019

Day Treatment Intensive ALL Services					
FY	Number of Clients	Number of Hours	Hours Per Client	Cost Per Hour	Approved Amount
2014-15	671	371,690	554	\$ 34.95	\$ 12,989,440
2015-16	575	319,447	556	\$ 35.65	\$ 11,389,537
2016-17	524	289,492	552	\$ 36.30	\$ 10,508,544
2017-18	460	268,914	585	\$ 36.50	\$ 9,814,618
2018-19	486	193,378	398	\$ 37.74	\$ 7,297,938
2019-20	327	60,201	184	\$ 43.38	\$ 2,611,608
2020-21	195	61,405	315	\$ 44.23	\$ 2,716,072
Change	-40.37%	2.00%	71.19%	1.96%	4.00%

Day Rehabilitation ALL Services					
FY	Number of Clients	Number of Hours	Hours Per Client	Cost Per Hour	Approved Amount
2014-15	1,400	720,640	515	\$ 21.81	\$ 15,720,360
2015-16	1,119	599,428	536	\$ 22.41	\$ 13,435,257
2016-17	978	465,578	476	\$ 23.21	\$ 10,805,727
2017-18	702	309,114	440	\$ 24.11	\$ 7,452,673
2018-19	775	373,852	482	\$ 24.97	\$ 9,336,729
2019-20	582	277,487	477	\$ 27.04	\$ 7,503,732
2020-21	427	283,037	663	\$ 27.57	\$ 7,803,882
Change	-26.63%	2.00%	38.99%	1.96%	4.00%

Children Services Approved Claims Data
Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts by Service
FY 2014-15 through FY 2017-18 utilizes actual data and
FY 2018-19 through FY 2020-21 utilizes weighted actual and forecast data
Actual Claims Data as of 6/30/2019

Targeted Case Management Services - SMA⁽¹⁷⁾ \$2.02					
FY	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount
2014-15	98,663	35,743,878	362	\$ 2.23	\$ 79,559,032
2015-16	91,151	33,818,562	371	\$ 2.24	\$ 75,799,504
2016-17	90,599	32,702,662	361	\$ 2.40	\$ 78,411,524
2017-18	91,158	32,121,954	352	\$ 2.46	\$ 79,123,684
2018-19	101,359	34,779,555	343	\$ 2.45	\$ 85,164,877
2019-20	101,448	35,238,699	347	\$ 2.38	\$ 83,935,171
2020-21	101,535	35,943,473	354	\$ 2.43	\$ 87,292,578
Change	0.09%	2.00%	1.91%	2.02%	4.00%

Therapy & Other Service Activities - SMA⁽¹⁴⁾ \$2.61					
FY	Number of Clients	Number of Minutes⁽¹⁸⁾	Minutes Per Client	Cost Per Minute	Approved Amount
2014-15	247,239	416,693,217	1,685	\$ 2.68	\$ 1,115,414,074
2015-16	245,834	415,578,337	1,690	\$ 2.72	\$ 1,130,488,370
2016-17	247,124	422,899,623	1,711	\$ 3.24	\$ 1,371,725,066
2017-18	254,238	430,210,926	1,692	\$ 3.22	\$ 1,385,024,934
2018-19	264,016	457,833,802	1,734	\$ 3.17	\$ 1,450,466,511
2019-20	267,515	463,041,034	1,731	\$ 3.20	\$ 1,482,760,597
2020-21	271,010	472,301,855	1,743	\$ 3.27	\$ 1,542,071,021
Change	1.31%	2.00%	0.69%	1.96%	4.00%

¹⁷ The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.

¹⁸ DHCS does not have sufficient data for FY 15-16 and 16-17 to produce a forecast for this service type.

Children Services Approved Claims Data
Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts by Service
FY 2014-15 through FY 2017-18 utilizes actual data and
FY 2018-19 through FY 2020-21 utilizes weighted actual and forecast data
Actual Claims Data as of 6/30/2019

FY	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount
2014-15	8,154	39,611,971	4,858	\$ 2.43	\$ 96,303,568
2015-16	7,964	37,484,511	4,707	\$ 2.43	\$ 91,070,052
2016-17	7,896	35,774,060	4,531	\$ 2.55	\$ 91,369,548
2017-18	8,140	36,813,391	4,523	\$ 2.44	\$ 89,718,431
2018-19	8,472	38,973,867	4,600	\$ 2.36	\$ 92,168,874
2019-20	8,540	39,040,475	4,571	\$ 2.33	\$ 90,896,107
2020-21	8,606	39,821,285	4,627	\$ 2.37	\$ 94,531,951
Change	0.77%	2.00%	1.23%	1.96%	4.00%

FY	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount
2014-15	78,958	24,674,536	313	\$ 5.14	\$ 126,815,633
2015-16	76,425	23,835,733	312	\$ 5.32	\$ 126,820,561
2016-17	74,576	23,955,808	321	\$ 5.51	\$ 131,888,501
2017-18	74,476	24,110,257	324	\$ 5.80	\$ 139,753,713
2018-19	76,990	25,633,566	333	\$ 5.95	\$ 152,582,862
2019-20	76,267	25,861,658	339	\$ 6.02	\$ 155,569,193
2020-21	75,542	26,378,891	349	\$ 6.13	\$ 161,791,961
Change	-0.95%	2.00%	2.95%	1.96%	4.00%

¹⁹ The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.

Children Services Approved Claims Data
Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts by Service
FY 2014-15 through FY 2017-18 utilizes actual data and
FY 2018-19 through FY 2020-21 utilizes weighted actual and forecast data
Actual Claims Data as of 6/30/2019

Crisis Intervention Services - SMA⁽²⁰⁾ \$3.88					
FY	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount
2014-15	20,138	6,040,704	300	\$ 4.58	\$ 27,643,272
2015-16	20,170	5,996,697	297	\$ 4.71	\$ 28,231,066
2016-17	21,910	6,678,724	305	\$ 4.98	\$ 33,271,038
2017-18	23,745	7,460,531	314	\$ 5.08	\$ 37,876,723
2018-19	25,831	7,856,484	304	\$ 5.18	\$ 40,730,300
2019-20	27,133	8,253,628	304	\$ 5.18	\$ 42,759,557
2020-21	28,434	8,418,700	296	\$ 5.28	\$ 44,469,939
Change	4.79%	2.00%	-2.63%	1.96%	4.00%

FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount
2014-15	2,254	18,752	8.32	\$ 1,032.86	\$ 19,368,206
2015-16	1,976	15,108	7.65	\$ 1,038.24	\$ 15,685,723
2016-17	2,085	14,915	7.15	\$ 1,156.90	\$ 17,255,118
2017-18	2,330	15,405	6.61	\$ 1,331.58	\$ 20,512,981
2018-19	2,242	15,607	6.96	\$ 1,379.52	\$ 21,529,508
2019-20	2,270	15,996	7.05	\$ 1,371.86	\$ 21,944,116
2020-21	2,302	16,316	7.09	\$ 1,398.76	\$ 22,821,880
Change	1.41%	2.00%	0.57%	1.96%	4.00%

²⁰ The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.

Children Services Approved Claims Data
Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts by Service
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FY 2018-19 through FY 2020-21 utilizes weighted actual and forecast data
Actual Claims Data as of 6/30/2019

Psychiatric Inpatient Hospital Services - FFS/MC⁽²¹⁾					
FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount
2014-15	13,020	103,518	7.95	\$ 772.24	\$ 79,940,531
2015-16	12,591	103,800	8.24	\$ 816.03	\$ 84,703,606
2016-17	13,784	111,910	8.12	\$ 834.79	\$ 93,421,137
2017-18	14,154	115,342	8.15	\$ 921.13	\$ 106,245,252
2018-19	14,842	123,802	8.34	\$ 942.43	\$ 116,674,186
2019-20	15,528	129,049	8.31	\$ 962.66	\$ 124,230,452
2020-21	16,217	134,299	8.28	\$ 981.29	\$ 131,786,710
Change	4.44%	4.07%	-0.36%	1.94%	6.08%

Intensive Care Coordination					
FY	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount
2014-15	10,197	16,781,028	1,646	\$ 2.01	\$ 33,804,873
2015-16	11,693	19,299,558	1,651	\$ 1.99	\$ 38,396,698
2016-17	15,196	23,403,638	1,540	\$ 2.11	\$ 49,331,341
2017-18	20,411	27,430,326	1,344	\$ 2.16	\$ 59,291,220
2018-19	27,506	33,282,806	1,210	\$ 2.14	\$ 71,169,550
2019-20	31,661	38,637,307	1,220	\$ 2.11	\$ 81,386,990
2020-21	35,813	39,410,053	1,100	2.15	84,642,470
Change	13.11%	2.00%	-9.83%	1.96%	4.00%

²¹ There were significantly fewer approved claims in FY's 2012-13, 13-14, and 14-15 for Day Treatment Intensive Half Day services.

Children Services Approved Claims Data
Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts by Service
FY 2014-15 through FY 2017-18 utilizes actual data and
FY 2018-19 through FY 2020-21 utilizes weighted actual and forecast data
Actual Claims Data as of 6/30/2019

Intensive Home Based Services					
FY	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount
2014-15	7,846	18,519,262	2,360	\$ 2.58	\$ 47,726,896
2015-16	8,843	21,052,937	2,381	\$ 2.68	\$ 56,521,157
2016-17	10,886	24,245,802	2,227	\$ 2.85	\$ 69,012,343
2017-18	12,732	27,355,583	2,149	\$ 2.91	\$ 79,715,697
2018-19	16,074	33,000,262	2,053	\$ 2.82	\$ 92,976,083
2019-20	18,239	38,038,092	2,086	\$ 2.78	\$ 105,643,352
2020-21	20,404	38,798,854	1,902	\$ 2.83	109,869,086
Change	11.87%	2.00%	-8.82%	1.96%	4.00%

Adults Services – Approved Claims Data

	Fiscal Year	Approved Claims ^(22&23) (In 1,000s)	Percentage Change in Claim Costs	Unduplicated Clients Receiving SMHS	Percent Growth in Clients	Cost Per Client	Percent Growth in Cost Per Client
Actual	2009-10	\$ 763,267	-6.65%	229,075	-4.00%	\$ 3,332	
Actual	2010-11	\$ 763,012	-0.03%	227,690	-0.60%	\$ 3,351	0.57%
Actual	2011-12	\$ 794,680	4.15%	231,749	1.78%	\$ 3,429	2.33%
Actual	2012-13	\$ 947,399	19.22%	232,973	0.53%	\$ 4,067	18.61%
Actual	2013-14	\$ 1,144,721	20.83%	295,132	26.68%	\$ 3,879	-4.62%
Actual	2014-15	\$ 1,427,633	24.71%	338,914	14.83%	\$ 4,212	8.58%
Actual	2015-16	\$ 1,499,703	5.05%	343,127	1.24%	\$ 4,371	3.77%
Actual	2016-17	\$ 1,663,482	10.92%	339,714	-0.99%	\$ 4,897	12.03%
Actual	2017-18	\$ 1,774,148	6.65%	336,801	-0.86%	\$ 5,268	7.58%
Actual + Forecast	2018-19	\$ 1,877,054	5.80%	344,656	2.33%	\$ 5,446	3.38%
Forecast	2019-20	\$ 2,028,144	8.05%	355,581	3.17%	\$ 5,704	4.74%
Forecast	2020-21	\$ 2,179,234	7.45%	366,505	3.07%	\$ 5,946	4.24%

²² Actual Approved Claims SD/MC Data for Specialty Mental Health as of June 30, 2019.

²³ FFS/MC inpatient service costs are not included in this table of approved claims.

Adult Services Approved Claims Data
Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts by Service
FY 2014-15 through FY 2017-18 utilizes actual data and
FY 2018-19 through FY 2020-21 utilizes weighted actual and forecast data
Actual Claims Data as of 6/30/2019

FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount
2014-15	5,907	64,823	10.97	\$ 747.70	\$ 48,468,023
2015-16	5,837	64,587	11.07	\$ 744.53	\$ 48,086,974
2016-17	5,498	67,131	12.21	\$ 788.56	\$ 52,936,888
2017-18	5,615	69,760	12.42	\$ 843.60	\$ 58,849,838
2018-19	5,424	73,631	13.57	\$ 827.38	\$ 60,920,622
2019-20	5,718	80,465	14.07	\$ 812.28	\$ 65,360,348
2020-21	6,009	82,074	13.66	\$ 852.10	\$ 69,935,572
Change	5.09%	2.00%	-2.91%	4.90%	7.00%

FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount
2014-15	7,306	120,470	16.49	\$ 339.44	\$ 40,892,508
2015-16	7,343	130,265	17.74	\$ 358.99	\$ 46,763,571
2016-17	8,040	141,753	17.63	\$ 371.85	\$ 52,711,295
2017-18	8,622	157,559	18.27	\$ 366.36	\$ 57,723,521
2018-19	9,666	155,647	16.10	\$ 389.93	\$ 60,691,477
2019-20	10,500	170,090	16.20	\$ 382.90	\$ 65,127,701
2020-21	11,331	173,492	15.31	\$ 401.67	\$ 69,686,640
Change	7.91%	2.00%	-5.49%	4.90%	7.00%

²⁴ The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.

Adult Services Approved Claims Data
Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts by Service
FY 2014-15 through FY 2017-18 utilizes actual data and
FY 2018-19 through FY 2020-21 utilizes weighted actual and forecast data
Actual Claims Data as of 6/30/2019

FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount
2014-15	1,541	127,702	82.87	\$ 184.99	\$ 23,623,998
2015-16	1,514	135,244	89.33	\$ 188.27	\$ 25,462,736
2016-17	1,586	148,701	93.76	\$ 197.72	\$ 29,400,648
2017-18	1,529	151,621	99.16	\$ 207.43	\$ 31,450,794
2018-19	1,610	163,302	101.43	\$ 207.55	\$ 33,893,731
2019-20	1,670	178,454	106.86	\$ 203.79	\$ 36,367,645
2020-21	1,730	182,023	105.22	\$ 213.78	\$ 38,913,380
Change	3.59%	2.00%	-1.53%	4.90%	7.00%

FY	Number of Clients	Number of Hours	Hours Per Client	Cost Per Hour	Approved Amount
2014-15	47,568	1,117,043	23	\$ 114.20	\$ 127,562,659
2015-16	50,576	1,251,227	25	\$ 113.08	\$ 141,492,027
2016-17	54,763	1,323,311	24	\$ 116.43	\$ 154,074,877
2017-18	56,187	1,359,428	24	\$ 126.96	\$ 172,596,592
2018-19	54,351	1,453,210	27	\$ 122.07	\$ 177,386,652
2019-20	58,665	1,587,935	27	\$ 119.87	\$ 190,350,135
2020-21	62,976	1,619,694	26	\$ 125.75	\$ 203,674,645
Change	7.35%	2.00%	-3.70%	4.90%	7.00%

²⁵ The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.

Adult Services Approved Claims Data
Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts by Service
FY 2014-15 through FY 2017-18 utilizes actual data and
FY 2018-19 through FY 2020-21 utilizes weighted actual and forecast data
Actual Claims Data as of 6/30/2019

FY	Number of Clients	Number of Hours	Hours Per Client	Cost Per Hour	Approved Amount
2014-15	1,248	301,474	242	\$ 28.87	\$ 8,702,698
2015-16	635	149,804	236	\$ 31.01	\$ 4,644,830
2016-17	580	128,290	221	\$ 32.61	\$ 4,183,574
2017-18	539	123,992	230	\$ 33.34	\$ 4,133,912
2018-19	646	140,335	217	\$ 31.16	\$ 4,373,375
2019-20	650	153,332	236	\$ 30.61	\$ 4,693,015
2020-21	653	156,398	240	\$ 32.11	\$ 5,021,526
Change	0.46%	2.00%	1.69%	4.90%	7.00%

FY	Number of Clients	Number of Hours	Hours Per Client	Cost Per Hour	Approved Amount
2014-15					
2015-16	1	65	65	\$ 43.65	\$ 2,852
2016-17	135	11,928	88	\$ 37.32	\$ 445,161
2017-18	130	14,958	115	\$ 35.89	\$ 536,768
2018-19	128	15,856	124	\$ 38.89	\$ 616,686
2019-20	121	17,325	143	\$ 38.19	\$ 661,592
2020-21	113	17,672	156	\$ 40.06	\$ 707,904
Change	-6.61%	2.00%	9.09%	4.90%	7.00%

Adult Services Approved Claims Data
Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts by Service
FY 2014-15 through FY 2017-18 utilizes actual data and
FY 2018-19 through FY 2020-21 utilizes weighted actual and forecast data
Actual Claims Data as of 6/30/2019

FY	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount
2014-15	133,687	53,597,274	401	\$ 2.42	\$ 129,804,324
2015-16	132,257	54,299,691	411	\$ 2.47	\$ 134,325,534
2016-17	127,917	53,930,484	422	\$ 2.62	\$ 141,211,581
2017-18	129,459	55,850,107	431	\$ 2.76	\$ 153,984,498
2018-19	133,228	59,015,236	443	\$ 2.75	\$ 162,181,660
2019-20	136,786	64,479,935	471	\$ 2.70	\$ 174,010,571
2020-21	140,342	65,769,534	469	\$ 2.83	\$ 186,191,311
Change	2.60%	2.00%	-0.42%	4.90%	7.00%

FY	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount
2014-15	245,156	192,869,064	787	\$ 2.76	\$ 531,478,881
2015-16	249,496	201,314,816	807	\$ 2.80	\$ 564,211,327
2016-17	244,129	200,909,759	823	\$ 3.30	\$ 663,635,711
2017-18	243,300	201,949,291	830	\$ 3.41	\$ 688,104,526
2018-19	254,135	220,055,472	866	\$ 3.44	\$ 757,699,690
2019-20	263,038	240,436,870	914	\$ 3.38	\$ 812,962,623
2020-21	271,942	245,245,608	902	\$ 3.55	\$ 869,870,007
Change	3.39%	2.00%	-1.31%	4.90%	7.00%

²⁶ The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.

Adult Services Approved Claims Data
Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts by Service
FY 2014-15 through FY 2017-18 utilizes actual data and
FY 2018-19 through FY 2020-21 utilizes weighted actual and forecast data
Actual Claims Data as of 6/30/2019

FY	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount
2014-15	226,110	61,667,540	273	\$ 5.39	\$ 332,121,212
2015-16	228,853	63,860,509	279	\$ 5.63	\$ 359,796,991
2016-17	225,621	64,253,828	285	\$ 5.98	\$ 384,463,960
2017-18	221,605	64,850,725	293	\$ 6.43	\$ 416,796,656
2018-19	221,715	70,328,459	317	\$ 6.21	\$ 436,519,724
2019-20	226,203	76,843,985	340	\$ 6.10	\$ 468,396,823
2020-21	230,691	78,380,864	340	\$ 6.39	\$ 501,184,601
Change	1.98%	2.00%	0%	4.90%	7.00%

FY	Number of Clients	Number of Minutes	Minutes Per Client	Cost Per Minute	Approved Amount
2014-15	46,625	10,569,517	227	\$ 4.61	\$ 48,683,642
2015-16	47,553	11,354,905	239	\$ 4.81	\$ 54,604,832
2016-17	51,961	13,146,470	253	\$ 5.09	\$ 66,941,445
2017-18	49,982	13,035,039	261	\$ 5.20	\$ 67,813,905
2018-19	52,316	14,387,979	275	\$ 5.34	\$ 76,779,222
2019-20	55,815	15,722,031	282	\$ 5.24	\$ 82,386,949
2020-21	59,311	16,036,472	270	\$ 5.50	\$ 88,154,035
Change	6.26%	2.00%	-4.26%	4.90%	7.00%

²⁷ The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.

Adult Services Approved Claims Data
Number of Clients, Units of Service, Costs Per Unit, and Approved Amounts by Service
FY 2014-15 through FY 2017-18 utilizes actual data and
FY 2018-19 through FY 2020-21 utilizes weighted actual and forecast data
Actual Claims Data as of 6/30/2019

FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount
2014-15	10,196	94,872	9.30	\$ 1,436.62	\$ 136,294,610
2015-16	9,319	96,795	10.39	\$ 1,242.93	\$ 120,309,211
2016-17	8,863	91,718	10.35	\$ 1,237.13	\$ 113,466,732
2017-18	8,822	84,795	9.61	\$ 1,440.62	\$ 122,157,242
2018-19	8,858	90,654	10.23	\$ 1,530.02	\$ 138,702,251
2019-20	9,115	97,528	10.70	\$ 1,525.90	\$ 148,818,399
2020-21	9,371	98,503	10.51	\$ 1,616.55	\$ 159,235,687
Change	2.81%	1.00%	-1.78%	5.94%	7.00%

FY	Number of Clients	Number of Days	Days Per Client	Cost Per Day	Approved Amount
2014-15	23,973	276,119	11.52	\$ 672.36	\$ 185,652,125
2015-16	25,874	304,978	11.79	\$ 706.63	\$ 215,506,108
2016-17	27,060	330,895	12.23	\$ 732.23	\$ 242,291,854
2017-18	28,200	343,125	12.17	\$ 778.58	\$ 267,149,433
2018-19	30,037	359,021	11.95	\$ 800.66	\$ 287,452,490
2019-20	31,937	378,084	11.84	\$ 814.21	\$ 307,838,782
2020-21	33,842	397,147	11.74	\$ 826.46	\$ 328,225,069
Change	5.96%	5.04%	-0.84%	1.50%	6.62%

²⁸ The State Maximum Allowance (SMA) for FY 11/12 is noted here as a historical reference and was removed as maximum rate for computing federal reimbursement for dates of service beginning July 1, 2012 per AB 1297.

²⁹ Currently analyzing the reason that Day Rehabilitative Half Day Services cost per day exceeds the SMA in FY's 09-10, 10-11, 11-12.

Claim Lag

Claim lag is a normal part of the claims reimbursement process. The lag time is defined as the period of time from when the actual service occurred to when the county submits the claim to the State. The lag time may vary depending on local provider and county claim submission and review processes. Also, some counties submit claims on a weekly basis, while others submit claims on a monthly basis in batches.

The charts on the next pages provide a historical view of claim lag for Children and Adult services rendered in the last three fiscal years.

Historical Averages of Claim Lag for Children Services Claims			
Number of Days it takes for the Claim to be Submitted	FY 2015-16 Percentage of Claims Submitted	FY 2016-17 Percentage of Claims Submitted	FY 2017-18 Percentage of Claims Submitted
1 to 30 days	4.46%	4.70%	5.85%
31 to 60 days	19.27%	17.06%	18.23%
61 to 90 days	37.53%	37.63%	36.63%
91 to 120 days	18.36%	18.90%	21.08%
121 to 150 days	6.38%	9.32%	8.54%
151 to 180 days	2.94%	4.05%	3.41%
181 to 365 days	10.39%	7.06%	5.9%
Over 366 days	0.67%	1.28%	0.36%

Historical Averages of Claim Lag for Adult Services Claim			
Number of Days it takes for the Claim to be Submitted	FY 2015-16 Percentage of Claims Submitted	FY 2016-17 Percentage of Claims Submitted	FY 2017-18 Percentage of Claims Submitted
1 to 30 days	4.45%	4.61%	5.47%
31 to 60 days	18.81%	17.08%	18.35%
61 to 90 days	32.62%	31.89%	31.07%
91 to 120 days	20.91%	19.78%	21.50%
121 to 150 days	6.90%	11.43%	10.10%
151 to 180 days	3.43%	4.97%	4.25%
181 to 365 days	12.15%	9.79%	8.65%
Over 366 days	0.73%	0.45%	0.61%

The Affordable Care Act and Specialty Mental Health Services

The Affordable Care Act has made Specialty Mental Health Services available to newly enrolled individuals who meet medical necessity criteria. The data for the Affordable Care Act (ACA) Expansion Clients is as of June 30, 2019. The data represents actual approved claims received as of June 30, 2019 and is not adjusted for claim lag nor has any forecasting methodology been applied to the data. The presented data simply serves as an indication of the growth and utilization of SMHS by ACA Expansion Clients.

Impact of the ACA on SMHS

The ACA approved claim amounts shown below are the fourth complete year's worth of data. This is because claims associated with the ACA were first approved beginning in January 2014 (FY 2013-14). The non-ACA data in the following tables are also not forecasted amounts and therefore are not comparable to other data in this document. The \$783 million shown below represents actual approved claims from ACA clients that were received by June 30, 2019.

FY 2017-18 Approved Claim Amounts for ACA and Non-ACA Clients		
ACA Client	Non-ACA Client	Total
\$ 782,545,907	\$ 1,450,071,752	\$ 2,232,617,659

Growth in the Client Base

Following table displays the number of unduplicated ACA beneficiaries who received at least one Specialty Mental Health Services in FY 2017-18.

FY 2017-18 Adult Statewide Client Counts and New Adult ACA Clients		
ACA Client	Non-ACA Client	Total
179,395	273,772	453,167

Impact of the ACA at the Service Type Level

The chart below shows the FY 2017-18 service type costs from Non-ACA adult clients and the added cost to those respective service types from ACA clients from claims received as of June 30, 2019.

Estimated 2017-18 Costs with Approved Claims from ACA and Non-ACA Clients (In Thousands)								
	Adult Residential Treatment Services	Case Management /Brokerage	Crisis Intervention	Crisis Residential Treatment Services	Crisis Stabilization	Day Rehabilitation	Day Treatment Intensive	Hospital Inpatient
Claims from Non-ACA Clients	\$ 24,191	\$ 120,441	\$ 42,814	\$ 32,433	\$ 96,720	\$ 2,999	\$ 871	\$ 62,798
Claims from ACA Clients	\$ 8,543	\$ 43,038	\$ 30,163	\$ 28,313	\$ 84,321	\$ 1,836	\$ 181	\$ 51,171

Estimated 2017-18 Costs with Approved Claims from ACA and Non-ACA Clients (In Thousands)								
	Hospital Inpatient Admin	ICC	IHBS	Medication Support Services	Mental Health Services	Psychiatric Health Facility	Therapeutic Behavioral Services	Psychiatric Inpatient Hospital Services FFS/MC
Claims from Non-ACA Clients	\$ 12,155	\$ 3,042	\$ 4,452	\$ 305,056	\$ 541,212	\$ 39,793	\$ 1,280	\$ 159,814
Claims from ACA Clients	\$ 3,447	\$ 69	\$ 120	\$ 131,260	\$ 242,284	\$ 22,065	\$ 75	\$ 135,660

Demographics by Age: Non-ACA vs. ACA enrollees

The chart below shows that 71.1% of the non-ACA clients who received SMHS in FY 2017-18 were between the ages of 21 and 59 while for ACA clients, the percentage was 88.0%. More ACA clients are in the 21 to 59 age group.

FY 2017-18 Adult Statewide Client Counts and New Adult ACA Clients		
Age	Non-ACA Clients	ACA Clients
18-20	10.2%	6.5%
21-59	71.1%	88.0%
60-64	9.8%	5.2%
65 and up	8.9%	0.3%

Demographics by Gender: Non-ACA vs. ACA enrollees

The chart below shows that of the ACA clients who received SMHS in FY 2017-18, 54.7% were men, while 45.3% were women. For non-ACA clients, a higher percentage of females received services compared to males.

FY 2017-18 Non-ACA and ACA Clients		
Gender	Non-ACA Clients	ACA Clients
Male	45.0%	54.7%
Female	55.0%	45.3%

Demographics by Race: Non-ACA vs. ACA enrollees

The chart below shows that of the ACA clients who received SMHS in FY 2017-18, 35.0% were White, 31.6% were Hispanic, and 13.6% were Black.

FY 2017-18		
Race	Non-ACA Clients	ACA Clients
White	30.8%	35.0%
Hispanic	25.1%	31.6%
Black	15.2%	13.5%
Other	21.6%	13.7%
Asian or Pacific Islander	6.6%	5.4%
Alaskan Native or American Indian	0.7%	0.8%

Summary Findings ACA and its impact to SMHS

The ACA is having a significant impact to SMHS. Utilizing claims data as of June 30, 2019 an additional \$783 million in SMHS was provided to approximately 179,000 Medi-Cal ACA clients in FY 2017-18.

Detailed Service Type Forecasts and Utilization Metrics: Children Services

Children Adult Crisis Residential Services

Adult Crisis Residential Services (CRS):

Adult crisis residential services provide an alternative to acute psychiatric hospital services for beneficiaries who otherwise would require hospitalization. The Crisis Residential Service programs for adults provide normalized living environments, integrated into residential communities. The services follow a social rehabilitation model that integrates aspects of emergency psychiatric care, psychosocial rehabilitation, milieu therapy, case management and practical social work.

Summary:

The forecast for Adult Crisis Residential Services indicates an increase in costs and clients.

Data Composition			
Actual	FY 2014-15	\$ 2,439,242	373
Actual	FY 2015-16	\$ 2,482,188	368
Actual	FY 2016-17	\$ 2,343,727	380
Actual	FY 2017-18	\$ 3,023,002	404
Actual + Forecast	FY 2018-19	\$ 3,037,261	454
Forecast	FY 2019-20	\$ 3,185,109	489
Forecast	FY 2020-21	3,312,513	508
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 1a
Children
Clients Receiving Adult Crisis Residential Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 0 and 8 Years of Age	Clients Between 9 and 15 Years of Age	Clients Between 16 and 17 Years of Age	Clients Between 18 and 20 Years of Age
ACR	0.0%	0.0%	0.0%	100.0%
Total Children	22.4%	47.7%	17.9%	12.0%

Table 1b
Children
Clients Receiving Adult Crisis Residential Services by Race / Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
ACR	27.3%	29.0%	14.6%	3.6%	0.2%	25.2%
Total Children	19.4%	54.3%	11.6%	2.9%	0.5%	11.3%

Table 1c
Children
Clients Receiving Adult Crisis Residential Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
ACR	45.1%	54.9%
Total Children	46.6%	53.4%

Table 1d
Other Services Received by Children Receiving
Adult Crisis Residential Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
ADULT CRISIS RESIDENTIAL	404	100.00%
MEDICATION SUPPORT	365	90.35%
THERAPY AND OTHER SERVICE ACTIVITIES	328	81.19%
TARGETED CASE MANAGEMENT	275	68.07%
CRISIS STABILIZATION	248	61.39%
FFS-HOSPITAL INPATIENT	181	44.80%
CRISIS INTERVENTION	177	43.81%
HOSPITAL INPATIENT	79	19.55%
PHF	41	10.15%
ADULT RESIDENTIAL	37	9.16%
ICC	23	5.69%
IHBS	8	1.98%
THERAPEUTIC BEHAVIORAL SERVICES	7	1.73%
DAY REHABILITATION	2	0.50%
DAY TREATMENT INTENSIVE	1	0.25%

Service Metrics:

**Table 1e
Children
Adult Crisis Residential Services Approved Amount
Fiscal Year 2017-18**

Statistic	Amount	Quartile	Amount
Number of Clients	404	100%	\$ 55,533
Mean	\$ 7,483	99%	\$ 32,840
Standard Deviation	\$ 8,380	95%	\$ 27,767
Median	\$ 4,502	90%	\$ 18,000
Mode	\$ 4,502	75%	\$ 9,624
Interquartile Range	\$ 7,732	50%	\$ 4,502
		25%	\$ 1,892

**Table 1f
Children
Adult Crisis Residential Services Days
Fiscal Year 2017-18**

Statistic			
Number of Clients	404	100%	152
Mean	21	99%	103
Standard Deviation	23	95%	76
Median	14	90%	47
Mode	14	75%	27
Interquartile Range	22	50%	14
		25%	5

**Table 1g
Children
Historical Trends
Adult Crisis Residential Services by Fiscal Year**

Data Type				
Number of Clients	368	380	404	454
Number of Days	7,158	6,561	8,395	8,429
Days Per Client	19	17	21	19
Approved Amount	\$ 2,482,188	\$ 2,343,727	\$ 3,023,002	\$ 3,037,261

*FY 2018-19 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Children

Adult Residential Treatment Services

Adult Residential Treatment Services:

Adult Residential Treatment Services are rehabilitative services provided in a non-institutional, residential setting for beneficiaries who would be at risk of hospitalization or other institutional placement if they were not receiving residential treatment services. The services include a wide range of activities and services that support beneficiaries in their effort to restore, maintain, and apply interpersonal and independent living skills and to access community support systems. Service activities may include assessment, plan development, therapy, rehabilitation, and collateral.

Summary:

The forecast for Adult Residential Services indicates a decrease in costs in FY 2019-20, and a slight increase in costs in FY 2020-21, and a decrease in clients through FY 2020-21.

Data Composition			
Actual	FY 2014-15	\$ 1,231,153	82
Actual	FY 2015-16	\$ 1,415,647	83
Actual	FY 2016-17	\$ 1,185,171	76
Actual	FY 2017-18	\$ 1,282,817	79
Actual + Forecast	FY 2018-19	\$ 1,258,258	98
Forecast	FY 2019-20	\$ 1,138,956	97
Forecast	FY 2020-21	\$ 1,184,514	91
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates a decrease in dollars and clients in FY 2019-20 and a slight increase in dollars and a decrease in clients in FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 2a
Children
Clients Receiving Adult Residential Treatment Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 0 and 8 Years of Age	Clients Between 9 and 15 Years of Age	Clients Between 16 and 17 Years of Age	Clients Between 18 and 20 Years of Age
AR	0.0%	0.0%	0.0%	100.0%
Total Children	22.4%	47.7%	17.9%	12.0%

Table 2b
Children
Clients Receiving Adult Residential Treatment Services by Race / Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
AR	20.9%	18.6%	15.1%	4.7%	1.2%	39.5%
Total Children	19.4%	54.3%	11.6%	2.9%	0.5%	11.3%

Table 2c
Children
Clients Receiving Adult Residential Treatment Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
AR	37.2%	62.8%
Total Children	46.6%	53.4%

Table 2d
Other Services Received by Children Receiving
Adult Residential Treatment Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
ADULT RESIDENTIAL	79	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	72	91.14%
TARGETED CASE MANAGEMENT	68	86.08%
MEDICATION SUPPORT	62	78.48%
CRISIS STABILIZATION	44	55.70%
ADULT CRISIS RESIDENTIAL	37	46.84%
CRISIS INTERVENTION	33	41.77%
FFS-HOSPITAL INPATIENT	27	34.18%
HOSPITAL INPATIENT	10	12.66%
ICC	6	7.59%
PHF	4	5.06%
IHBS	3	3.80%
THERAPEUTIC BEHAVIORAL SERVICES	2	2.53%
DAY REHABILITATION	1	1.27%

Service Metrics:

Table 2e
Children
Adult Residential Treatment Services Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	79	100%	\$ 88,862
Mean	\$ 16,238	99%	\$ 88,862
Standard Deviation	\$ 14,707	95%	\$ 42,058
Median	\$ 12,452	90%	\$ 35,820
Mode	\$ 3,849	75%	\$ 22,942
Interquartile Range	\$ 17,502	50%	\$ 12,452
		25%	\$ 5,440

Table 2f
Children
Adult Residential Treatment Services Days
Fiscal Year 2017-18

Statistic	Days	Quartile	Days
Number of Clients	79	100%	314
Mean	88	99%	314
Standard Deviation	73	95%	250
Median	62	90%	200
Mode	33	75%	134
Interquartile Range	101	50%	62
		25%	33

Table 2g
Children
Historical Trends
Adult Residential Treatment Services by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	83	76	79	98
Number of Days	8,341	6,709	6,967	6,658
Days Per Client	100	88	88	68
Approved Amount	\$ 1,415,647	\$ 1,185,171	\$ 1,282,817	\$ 1,258,258

*FY 2018-19 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Children Crisis Intervention

Crisis Intervention:

Crisis intervention services last less than 24 hours and are for, or on behalf of, a beneficiary for a condition that requires more timely response than a regularly scheduled visit. Service activities include, but are not limited to, assessment, collateral and therapy. Crisis Intervention services may either be face-to-face or by telephone with the beneficiary or the beneficiary's significant support person and may be provided anywhere in the community.

Summary:

The forecast for Crisis Intervention Services indicates an increase in costs and clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 27,643,272	20,138
Actual	FY 2015-16	\$ 28,231,066	20,170
Actual	FY 2016-17	\$ 33,271,038	21,910
Actual	FY 2017-18	\$ 37,876,723	23,745
Actual + Forecast	FY 2018-19	\$ 40,730,300	25,831
Forecast	FY 2019-20	\$ 42,759,557	27,133
Forecast	FY 2020-21	\$ 44,469,939	28,434
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 3a
Children
Clients Receiving Crisis Intervention - Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 0 and 8 Years of Age	Clients Between 9 and 15 Years of Age	Clients Between 16 and 17 Years of Age	Clients Between 18 and 20 Years of Age
CI	5.8%	53.8%	23.5%	16.8%
Total Children	22.4%	47.7%	17.9%	12.0%

Table 3b
Children
Clients Receiving Crisis Intervention - Services by Race / Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
CI	23.6%	51.7%	10.7%	3.5%	0.7%	9.8%
Total Children	19.4%	54.3%	11.6%	2.9%	0.5%	11.3%

Table 3c
Children
Clients Receiving Crisis Intervention - Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
CI	56.3%	43.7%
Total Children	46.6%	53.4%

Table 3d
Other Services Received by Children Receiving
Crisis Intervention - Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
CRISIS INTERVENTION	23,745	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	18,732	78.89%
MEDICATION SUPPORT	11,831	49.83%
TARGETED CASE MANAGEMENT	11,430	48.14%
FFS-HOSPITAL INPATIENT	6,913	29.11%
CRISIS STABILIZATION	4,657	19.61%
ICC	3,499	14.74%
IHBS	2,439	10.27%
THERAPEUTIC BEHAVIORAL SERVICES	2,012	8.47%
HOSPITAL INPATIENT	1,230	5.18%
PHF	637	2.68%
ADULT CRISIS RESIDENTIAL	177	0.75%
DAY TREATMENT INTENSIVE	117	0.49%
DAY REHABILITATION	80	0.34%
ADULT RESIDENTIAL	33	0.14%

Service Metrics:

Table 3e
Children
Crisis Intervention - Services Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	23,745	100%	\$ 46,721
Mean	\$ 1,595	99%	\$ 9,572
Standard Deviation	\$ 1,989	95%	\$ 4,811
Median	\$ 992	90%	\$ 3,065
Mode	\$ 2,611	75%	\$ 2,285
Interquartile Range	\$ 1,813	50%	\$ 992
		25%	\$ 471

Table 3f
Children
Crisis Intervention - Services Minutes
Fiscal Year 2017-18

Statistic	Minutes	Quartile	Minutes
Number of Clients	23,745	100%	8,630
Mean	314	99%	1,842
Standard Deviation	368	95%	939
Median	206	90%	588
Mode	480	75%	443
Interquartile Range	328	50%	206
		25%	115

Table 3g
Children
Historical Trends
Crisis Intervention - Services by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	20,170	21,910	23,745	25,831
Number of Minutes	5,996,697	6,678,724	7,460,531	7,856,484
Minutes Per Client	297	305	314	304
Approved Amount	\$ 28,231,066	\$ 33,271,038	\$ 37,876,723	\$ 40,730,300

*FY 2018-19 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Children Crisis Stabilization

Crisis Stabilization:

Crisis stabilization services last less than 24 hours and are for, or on behalf of, a beneficiary for a condition that requires a timelier response than a regularly scheduled visit. Service activities include but are not limited to one or more of the following: assessment, collateral, and therapy. Collateral addresses the mental health needs of the beneficiary to provide coordination with significant others and treatment providers.

Summary:

The forecast for Crisis Stabilization Services indicates an increase in costs and clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 17,253,824	11,619
Actual	FY 2015-16	\$ 20,965,091	12,265
Actual	FY 2016-17	\$ 24,194,235	12,693
Actual	FY 2017-18	\$ 27,715,320	13,838
Actual + Forecast	FY 2018-19	\$ 28,998,563	13,081
Forecast	FY 2019-20	\$ 30,820,696	13,728
Forecast	FY 2020-21	\$ 32,053,524	14,376
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 4a
Children
Clients Receiving Crisis Stabilization - Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 0 and 8 Years of Age	Clients Between 9 and 15 Years of Age	Clients Between 16 and 17 Years of Age	Clients Between 18 and 20 Years of Age
CS	2.4%	45.2%	22.8%	29.6%
Total Children	22.4%	47.7%	17.9%	12.0%

Table 4b
Children
Clients Receiving Crisis Stabilization - Services by Race / Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
CS	21.3%	47.8%	14.1%	4.0%	0.6%	12.2%
Total Children	19.4%	54.3%	11.6%	2.9%	0.5%	11.3%

Table 4c
Children
Clients Receiving Crisis Stabilization - Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
CS	54.3%	45.7%
Total Children	46.6%	53.4%

Table 4d
Other Services Received by Children Receiving
Crisis Stabilization - Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
CRISIS STABILIZATION	13,838	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	9,683	69.97%
MEDICATION SUPPORT	6,855	49.54%
TARGETED CASE MANAGEMENT	6,061	43.80%
CRISIS INTERVENTION	4,657	33.65%
FFS-HOSPITAL INPATIENT	3,966	28.66%
ICC	1,867	13.49%
HOSPITAL INPATIENT	1,320	9.54%
THERAPEUTIC BEHAVIORAL SERVICES	1,180	8.53%
IHBS	1,156	8.35%
PHF	734	5.30%
ADULT CRISIS RESIDENTIAL	248	1.79%
DAY REHABILITATION	76	0.55%
DAY TREATMENT INTENSIVE	61	0.44%
ADULT RESIDENTIAL	44	0.32%

Service Metrics:

Table 4e
Children
Crisis Stabilization - Services Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	13,838	100%	\$ 89,106
Mean	\$ 2,003	99%	\$ 14,218
Standard Deviation	\$ 3,162	95%	\$ 6,189
Median	\$ 1,250	90%	\$ 4,168
Mode	\$ 1,891	75%	\$ 2,117
Interquartile Range	\$ 1,591	50%	\$ 1,250
		25%	\$ 526

Table 4f
Children
Crisis Stabilization - Services Hours
Fiscal Year 2017-18

Statistic	Hours	Quartile	Hours
Number of Clients	13,838	100%	680
Mean	18	99%	99
Standard Deviation	22	95%	47
Median	15	90%	36
Mode	20	75%	20
Interquartile Range	14	50%	15
		25%	6

Table 4g
Children
Historical Trends
Crisis Stabilization - Services by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	12,265	12,693	13,838	13,081
Number of Hours	215,680	217,699	243,446	232,531
Hours Per Client	18	17	18	18
Approved Amount	\$ 20,965,091	\$ 24,194,235	\$ 27,715,320	\$ 28,998,563

*FY 2018-19 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Children Day Rehabilitation

Day Rehabilitation:

Day rehabilitation services are a structured program of rehabilitation and therapy with services to improve, maintain or restore personal independence and functioning, consistent with requirements for learning and development and that provide services to a distinct group of beneficiaries who receive services. Service activities may include, but are not limited to assessment, plan development, therapy, rehabilitation and collateral.

Summary:

The forecast for Day Rehabilitation Services indicates a decrease in costs in FY 2019-20 and a slight increase in costs in FY 2020-21; and a decrease in clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 15,720,360	1,400
Actual	FY 2015-16	\$ 13,435,257	1,119
Actual	FY 2016-17	\$ 10,805,727	978
Actual	FY 2017-18	\$ 7,452,673	702
Actual + Forecast	FY 2018-19	\$ 9,336,729	775
Forecast	FY 2019-20	\$ 7,503,732	582
Forecast	FY 2020-21	\$ 7,803,882	427
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates a decrease in dollars in FY 2019-20 and a slight increase in dollars in FY 2020-21; and a decrease in clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 5a
Children
Clients Receiving Day Rehabilitation – All Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 0 and 8 Years of Age	Clients Between 9 and 15 Years of Age	Clients Between 16 and 17 Years of Age	Clients Between 18 and 20 Years of Age
DR	4.0%	32.7%	50.6%	12.7%
Total Children	22.4%	47.7%	17.9%	12.0%

Table 5b
Children
Clients Receiving Day Rehabilitation - All Services by Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
DR	19.7%	44.5%	24.6%	1.3%	0.4%	9.5%
Total Children	19.4%	54.3%	11.6%	2.9%	0.5%	11.3%

Table 5c
Children
Clients Receiving Day Rehabilitation - All Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
DR	32.5%	67.5%
Total Children	46.6%	53.4%

Table 5d
Other Services Received by Children Receiving
Day Rehabilitation - All Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
DAY REHABILITATION	702	100.00%
MEDICATION SUPPORT	544	77.49%
THERAPY AND OTHER SERVICE ACTIVITIES	373	53.13%
TARGETED CASE MANAGEMENT	216	30.77%
ICC	211	30.06%
IHBS	86	12.25%
CRISIS INTERVENTION	80	11.40%
THERAPEUTIC BEHAVIORAL SERVICES	80	11.40%
CRISIS STABILIZATION	76	10.83%
FFS-HOSPITAL INPATIENT	52	7.41%
HOSPITAL INPATIENT	28	3.99%
DAY TREATMENT INTENSIVE	5	0.71%
ADULT CRISIS RESIDENTIAL	2	0.28%
PHF	2	0.28%
ADULT RESIDENTIAL	1	0.14%

Service Metrics:

Table 5e
Children
Day Rehabilitation - All Services Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	702	100%	\$ 35,407
Mean	\$ 10,616	99%	\$ 34,428
Standard Deviation	\$ 9,204	95%	\$ 28,830
Median	\$ 7,963	90%	\$ 25,851
Mode	\$ 418	75%	\$ 16,143
Interquartile Range	\$ 13,344	50%	\$ 7,963
		25%	\$ 2,799

Table 5f
Children
Day Rehabilitation - All Services Hours
Fiscal Year 2017-18

Statistic	Hours	Quartile	Hours
Number of Clients	702	100%	1,518
Mean	440	99%	1,476
Standard Deviation	396	95%	1,236
Median	318	90%	1,098
Mode	18	75%	678
Interquartile Range	570	50%	318
		25%	108

Table 5g
Children
Historical Trends
Day Rehabilitation - All Services by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Hours Per Clients	1,119	978	702	775
Number of Hours	599,428	465,578	309,114	373,852
Days Per Client	536	476	440	482
Approved Amount	\$ 13,435,257	\$ 10,805,727	\$ 7,452,673	\$ 9,336,729

*FY 2018-19 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Children Day Treatment Intensive

Day Treatment Intensive:

Day treatment intensive services are a structured, multi-disciplinary program of therapy that may be used as an alternative to hospitalization to avoid placement in a more restrictive setting, or to maintain the client in a community setting and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to, assessment, plan development, therapy, rehabilitation and collateral.

Summary:

The forecast for Day Treatment Intensive Services indicates a decrease in costs in FY 2019-20 and a slight increase in costs in FY 2020-21; and a decrease in clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 12,989,440	671
Actual	FY 2015-16	\$ 11,389,537	575
Actual	FY 2016-17	\$ 10,508,554	524
Actual	FY 2017-18	\$ 9,814,618	460
Actual + Forecast	FY 2018-19	\$ 7,297,938	486
Forecast	FY 2019-20	\$ 2,611,608	327
Forecast	FY 2020-21	\$ 2,716,072	195
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates a decrease in dollars in FY 2019-20 and a slight increase in dollars in FY 2020-21; and a decrease in clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 6a
Children
Clients Receiving Day Treatment Intensive - All Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 0 and 8 Years of Age	Clients Between 9 and 15 Years of Age	Clients Between 16 and 17 Years of Age	Clients Between 18 and 20 Years of Age
DTI	42.1%	28.3%	22.9%	6.7%
Total Children	22.4%	47.7%	17.9%	12.0%

Table 6b
Children
Clients Receiving Day Treatment Intensive - All Services by Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
DTI	18.7%	39.6%	29.6%	0.6%	0.4%	11.3%
Total Children	19.4%	54.3%	11.6%	2.9%	0.5%	11.3%

Table 6c
Children
Clients Receiving Day Treatment Intensive - All Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
DTI	42.7%	57.3%
Total Children	46.6%	53.4%

Table 6d
Other Services Received by Children Receiving
Day Treatment Intensive - All Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
DAY TREATMENT INTENSIVE	460	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	356	77.39%
MEDICATION SUPPORT	286	62.17%
TARGETED CASE MANAGEMENT	185	40.22%
CRISIS INTERVENTION	117	25.43%
ICC	94	20.43%
THERAPEUTIC BEHAVIORAL SERVICES	84	18.26%
IHBS	62	13.48%
CRISIS STABILIZATION	61	13.26%
FFS-HOSPITAL INPATIENT	61	13.26%
PHF	33	7.17%
HOSPITAL INPATIENT	16	3.48%
DAY REHABILITATION	5	1.09%
ADULT CRISIS RESIDENTIAL	1	0.22%

Service Metrics:

Table 6e
Children
Day Treatment Intensive - All Services Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	460	100%	\$ 79,452
Mean	\$ 21,336	99%	\$ 68,334
Standard Deviation	\$ 16,410	95%	\$ 49,113
Median	\$ 17,852	90%	\$ 44,234
Mode	\$ 3,846	75%	\$ 33,603
Interquartile Range	\$ 27,073	50%	\$ 17,852
		25%	\$ 6,530

Table 6f
Children
Day Treatment Intensive - All Services Hours
Fiscal Year 2017-18

Statistic	Hours	Quartile	Hours
Number of Clients	460	100%	2,166
Mean	585	99%	2,076
Standard Deviation	448	95%	1,395
Median	501	90%	1,197
Mode	60	75%	918
Interquartile Range	732	50%	501
		25%	186

Table 6g
Children
Historical Trends
Day Treatment Intensive - All Services by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Hours per Client	575	524	460	486
Number of Hours	319,447	289,492	268,914	193,378
Days Per Client	556	552	585	398
Approved Amount	\$ 11,389,537	\$ 10,508,544	\$ 9,814,618	\$ 7,297,938

*FY 2018-19 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Children Medication Support

Medication Support:

Medication support services include prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals that are necessary to alleviate the symptoms of mental illness. Service activities may include but are not limited to: evaluation of the need for medication; evaluation of clinical effectiveness and side effects; obtaining informed consent; instruction in the use, risks and benefits of, and alternatives for, medication; collateral and plan development related to the delivery of service and/or assessment for the client; prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals; and medication education.

Summary:

The forecast for Medication Support Services indicates an increase in costs and a decrease in clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 126,815,633	78,958
Actual	FY 2015-16	\$ 126,820,561	76,425
Actual	FY 2016-17	\$ 131,888,501	74,576
Actual	FY 2017-18	\$ 139,753,713	74,476
Actual + Forecast	FY 2018-19	\$ 152,582,862	76,990
Forecast	FY 2019-20	\$ 155,569,193	76,267
Forecast	FY 2020-21	\$ 161,791,961	75,542
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and a decrease in clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 7a
Children
Clients Receiving Medication Support - Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 0 and 8 Years of Age	Clients Between 9 and 15 Years of Age	Clients Between 16 and 17 Years of Age	Clients Between 18 and 20 Years of Age
MS	13.4%	48.7%	20.7%	17.1%
Total Children	22.4%	47.7%	17.9%	12.0%

Table 7b
Children
Clients Receiving Medication Support - Services by Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
MS	21.5%	49.9%	11.5%	3.1%	0.5%	13.5%
Total Children	19.4%	54.3%	11.6%	2.9%	0.5%	11.3%

Table 7c
Children
Clients Receiving Medication Support - Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
MS	42.8%	57.2%
Total Children	46.6%	53.4%

Table 7d
Other Services Received by Children Receiving
Medication Support - Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
MEDICATION SUPPORT	74,476	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	66,787	89.68%
TARGETED CASE MANAGEMENT	36,032	48.38%
CRISIS INTERVENTION	11,831	15.89%
ICC	9,237	12.40%
FFS-HOSPITAL INPATIENT	8,769	11.77%
CRISIS STABILIZATION	6,855	9.20%
IHBS	5,923	7.95%
THERAPEUTIC BEHAVIORAL SERVICES	5,342	7.17%
HOSPITAL INPATIENT	1,539	2.07%
PHF	762	1.02%
DAY REHABILITATION	544	0.73%
ADULT CRISIS RESIDENTIAL	365	0.49%
DAY TREATMENT INTENSIVE	286	0.38%
ADULT RESIDENTIAL	62	0.08%

Service Metrics:

Table 7e
Children
Medication Support - Services Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	74,476	100%	\$ 83,381
Mean	\$ 1,876	99%	\$ 9,605
Standard Deviation	\$ 2,247	95%	\$ 5,162
Median	\$ 1,300	90%	\$ 3,866
Mode	\$ 720	75%	\$ 2,387
Interquartile Range	\$ 1,722	50%	\$ 1,300
		25%	\$ 665

Table 7f
Children
Medication Support - Services Minutes
Fiscal Year 2017-18

Statistic	Minutes	Quartile	Minutes
Number of Clients	74,476	100%	10,039
Mean	324	99%	1,552
Standard Deviation	343	95%	854
Median	240	90%	649
Mode	120	75%	410
Interquartile Range	282	50%	240
		25%	128

Table 7g
Children
Historical Trends
Medication Support - Services by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	76,425	74,576	74,476	76,990
Number of Minutes	23,835,733	23,955,808	24,110,257	25,633,566
Minutes Per Client	312	321	324	333
Approved Amount	\$126,820,561	\$131,888,501	\$139,753,713	\$152,582,862

*FY 2018-19 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Children Psychiatric Health Facility Services

Psychiatric Health Facility (PHF):

"Psychiatric Health Facility" means a facility licensed under the provisions beginning with Section 77001 of Chapter 9, Division 5, Title 22 of the California Code of Regulations.

"Psychiatric Health Facility Services" are therapeutic and/or rehabilitative services provided in a psychiatric health facility on an inpatient basis to beneficiaries who need acute care, which meets the criteria of Section 1820.205 of Chapter 11, Division 1, Title 9 of the California Code of Regulations, and whose physical health needs can be met in an affiliated general acute care hospital or in outpatient settings. These services are separate from those categorized as "Psychiatric Hospital Inpatient."

Summary:

The forecast for Psychiatric Health Facility Services indicates an increase in costs and clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 9,164,947	884
Actual	FY 2015-16	\$ 11,362,999	1,175
Actual	FY 2016-17	\$ 15,094,296	1,142
Actual	FY 2017-18	\$ 15,554,632	1,187
Actual + Forecast	FY 2018-19	\$ 17,353,399	1,286
Forecast	FY 2019-20	\$ 18,891,959	1,381
Forecast	FY 2020-21	\$ 19,647,637	1,477
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the

MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 8a
Children
Clients Receiving Psychiatric Health Facility Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 0 and 8 Years of Age	Clients Between 9 and 15 Years of Age	Clients Between 16 and 17 Years of Age	Clients Between 18 and 20 Years of Age
PHF	0.0%	41.6%	27.0%	31.4%
Total Children	22.4%	47.7%	17.9%	12.0%

Table 8b
Children
Clients Receiving Psychiatric Health Facility Services by Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
PHF	27.6%	41.8%	13.5%	4.4%	1.4%	11.2%
Total Children	19.4%	54.3%	11.6%	2.9%	0.5%	11.3%

Table 8c
Children
Clients Receiving Psychiatric Health Facility Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
PHF	57.2%	42.8%
Total Children	46.6%	53.4%

Table 8d
Other Services Received by Children Receiving
Psychiatric Health Facility Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
PHF	1,187	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	912	76.83%
MEDICATION SUPPORT	762	64.20%
CRISIS STABILIZATION	734	61.84%
TARGETED CASE MANAGEMENT	706	59.48%
CRISIS INTERVENTION	637	53.66%
FFS-HOSPITAL INPATIENT	315	26.54%
THERAPEUTIC BEHAVIORAL SERVICES	127	10.70%
ICC	71	5.98%
ADULT CRISIS RESIDENTIAL	41	3.45%
IHBS	36	3.03%
DAY TREATMENT INTENSIVE	33	2.78%
HOSPITAL INPATIENT	18	1.52%
ADULT RESIDENTIAL	4	0.34%
DAY REHABILITATION	2	0.17%

Service Metrics:

Table 8e
Children
Psychiatric Health Facility Services Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	1,187	100%	\$ 201,214
Mean	\$ 13,104	99%	\$ 95,855
Standard Deviation	\$ 19,726	95%	\$ 46,640
Median	\$ 6,248	90%	\$ 29,590
Mode	\$ 3,376	75%	\$ 14,795
Interquartile Range	\$ 11,234	50%	\$ 6,248
		25%	\$ 3,561

Table 8f
Children
Psychiatric Health Facility Services Days
Fiscal Year 2017-18

Statistic	Days	Quartile	Days
Number of Clients	1,187	100%	335
Mean	11	99%	98
Standard Deviation	20	95%	31
Median	6	90%	20
Mode	4	75%	10
Interquartile Range	6	50%	6
		25%	4

Table 8g
Children
Historical Trends
Psychiatric Health Facility Services by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	1,175	1,142	1,187	1,286
Number of Days	13,871	13,497	12,688	13,006
Days Per Client	12	12	11	10
Approved Amount	\$ 11,362,999	\$ 15,094,296	\$ 15,554,632	\$ 17,353,399

*FY 2018-19 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Children

Psychiatric Hospital Inpatient Services – SD/MC Hospitals

Psychiatric Hospital Inpatient Services – SD/MC Hospitals:

Psychiatric hospital inpatient services include both acute psychiatric hospital inpatient services and administrative day services. Acute psychiatric hospital inpatient services are provided to beneficiaries for whom the level of care provided in a hospital is medically necessary to diagnose or treat a covered mental illness. Administrative day services are hospital inpatient services provided to beneficiaries who were admitted to the hospital for an acute psychiatric hospital inpatient service and the beneficiary's stay at the hospital must be continued beyond the beneficiary's need for acute psychiatric hospital inpatient services due to lack of residential placement options at non-acute residential treatment facilities that meet the needs of the beneficiary.

Psychiatric hospital inpatient services are provided by SD/MC hospitals and FFS/MC hospitals. Mental Health Plans (MHPs) claim reimbursement for the cost of psychiatric hospital inpatient services provided by SD/MC hospitals through the SD/MC claiming system. FFS/MC hospitals claim reimbursement for the cost of psychiatric hospital inpatient services through the Fiscal Intermediary. MHPs are responsible for authorizing psychiatric hospital inpatient services reimbursed through either billing system. For SD/MC hospitals, the daily rate includes the cost of any needed professional services. The FFS/MC hospital daily rate does not include professional services, which are billed separately from the FFS/MC hospital inpatient services via the SD/MC claiming system.

Summary:

The forecast for Psychiatric Inpatient Hospital Services – SD/MC Hospitals indicates an increase in costs and clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 19,368,206	2,254
Actual	FY 2015-16	\$ 15,685,723	1,976
Actual	FY 2016-17	\$ 17,255,118	2,085
Actual	FY 2017-18	\$ 20,512,981	2,330
Actual + Forecast	FY 2018-19	\$ 21,529,508	2,242
Forecast	FY 2019-20	\$ 21,944,116	2,270
Forecast	FY 2020-21	\$ 22,821,880	2,302
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 9a
Children
Clients Receiving Psychiatric Hospital Inpatient Services - SD/MC Hospitals by
Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 0 and 8 Years of Age	Clients Between 9 and 15 Years of Age	Clients Between 16 and 17 Years of Age	Clients Between 18 and 20 Years of Age
HIS-SDMC	5.3%	48.4%	21.6%	24.7%
Total Children	22.4%	47.7%	17.9%	12.0%

Table 9b
Children
Clients Receiving Psychiatric Hospital Inpatient Services - SD/MC Hospitals by
Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
HIS-SDMC	16.2%	53.2%	15.7%	3.4%	0.2%	11.3%
Total Children	19.4%	54.3%	11.6%	2.9%	0.5%	11.3%

Table 9c
Children
Clients Receiving Psychiatric Hospital Inpatient Services - SD/MC Hospitals by
Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
HIS-SDMC	50.5%	49.5%
Total Children	46.6%	53.4%

Table 9d
Other Services Received by Children Receiving
Psychiatric Hospital Inpatient Services - SD/MC Hospitals
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
HOSPITAL INPATIENT	2,330	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	1,936	83.09%
MEDICATION SUPPORT	1,539	66.05%
CRISIS STABILIZATION	1,320	56.65%
CRISIS INTERVENTION	1,230	52.79%
TARGETED CASE MANAGEMENT	1,108	47.55%
FFS-HOSPITAL INPATIENT	577	24.76%
ICC	543	23.30%
IHBS	369	15.84%
THERAPEUTIC BEHAVIORAL SERVICES	259	11.12%
ADULT CRISIS RESIDENTIAL	79	3.39%
DAY REHABILITATION	28	1.20%
PHF	18	0.77%
DAY TREATMENT INTENSIVE	16	0.69%
ADULT RESIDENTIAL	10	0.43%

Service Metrics:

Table 9e
Children
Psychiatric Hospital Inpatient Services - SD/MC Hospitals
Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	2,330	100%	\$ 270,000
Mean	\$ 8,804	99%	\$ 64,975
Standard Deviation	\$ 13,884	95%	\$ 26,919
Median	\$ 5,625	90%	\$ 18,214
Mode	\$ 4,049	75%	\$ 8,849
Interquartile Range	\$ 5,989	50%	\$ 5,625
		25%	\$ 2,860

Table 9f
Children
Psychiatric Hospital Inpatient Services - SD/MC Hospitals Services Days
Fiscal Year 2017-18

Statistic	Days	Quartile	Days
Number of Clients	2,330	100%	155
Mean	7	99%	39
Standard Deviation	9	95%	19
Median	4	90%	13
Mode	2	75%	8
Interquartile Range	6	50%	4
		25%	2

Table 9g
Children
Historical Trends
Psychiatric Hospital Inpatient Services - SD/MC Hospitals by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	1,976	2,085	2,330	2,242
Number of Days	15,108	14,915	15,405	15,607
Days Per Client	8	7	7	7
Approved Amount	\$ 15,685,723	\$ 17,255,118	\$ 20,512,981	\$ 21,529,508

*FY 2018-19 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Children Targeted Case Management

Targeted Case Management (TCM):

Targeted case management (TCM) is a service that assists a beneficiary in accessing needed medical, educational, social, prevocational, vocational, rehabilitative, or other community services. The service activities may include, but are not limited to, communication, coordination and referral; monitoring service delivery to ensure beneficiary access to services and the service delivery system; monitoring of the beneficiary's progress; placement services; and plan development. TCM services may be face-to-face or by telephone with the client or significant support persons and may be provided anywhere in the community. Additionally, services may be provided by any person determined by the MHP to be qualified to provide the service, consistent with their scope of practice and state law.

Summary:

The forecast for Targeted Case Management indicates a decrease in costs in FY 2019-20 and an increase in costs in FY 2020-21; and an increase in clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 79,559,032	98,663
Actual	FY 2015-16	\$ 75,799,504	91,151
Actual	FY 2016-17	\$ 78,411,524	90,599
Actual	FY 2017-18	\$ 79,123,684	91,158
Actual + Forecast	FY 2018-19	\$ 85,164,877	101,359
Forecast	FY 2019-20	\$ 83,935,171	101,448
Forecast	FY 2020-21	\$ 87,292,578	101,535
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates a decrease in dollars in FY 2019-20 and an increase in dollars in FY 2020-21; and an increase in clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 10a
Children
Clients Receiving Targeted Case Management - Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 0 and 8 Years of Age	Clients Between 9 and 15 Years of Age	Clients Between 16 and 17 Years of Age	Clients Between 18 and 20 Years of Age
TCM	24.6%	47.1%	17.3%	11.0%
Total Children	22.4%	47.7%	17.9%	12.0%

Table 10b
Children
Clients Receiving Targeted Case Management - Services by Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
TCM	20.0%	53.3%	11.5%	3.1%	0.6%	11.5%
Total Children	19.4%	54.3%	11.6%	2.9%	0.5%	11.3%

Table 10c
Children
Clients Receiving Targeted Case Management - Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
TCM	45.5%	54.5%
Total Children	46.6%	53.4%

Table 10d
Other Services Received by Children Receiving
Targeted Case Management - Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
TARGETED CASE MANAGEMENT	91,158	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	87,568	96.06%
MEDICATION SUPPORT	36,032	39.53%
CRISIS INTERVENTION	11,430	12.54%
ICC	11,016	12.08%
IHBS	6,629	7.27%
CRISIS STABILIZATION	6,061	6.65%
FFS-HOSPITAL INPATIENT	6,003	6.59%
THERAPEUTIC BEHAVIORAL SERVICES	5,566	6.11%
HOSPITAL INPATIENT	1,108	1.22%
PHF	706	0.77%
ADULT CRISIS RESIDENTIAL	275	0.30%
DAY REHABILITATION	216	0.24%
DAY TREATMENT INTENSIVE	185	0.20%
ADULT RESIDENTIAL	68	0.07%

Service Metrics:

**Table 10e
Children
Targeted Case Management - Services Approved Amount
Fiscal Year 2017-18**

Statistic	Amount	Quartile	Amount
Number of Clients	91,158	100%	\$ 96,430
Mean	\$ 868	99%	\$ 9,134
Standard Deviation	\$ 1,979	95%	\$ 3,472
Median	\$ 289	90%	\$ 2,011
Mode	\$ 79	75%	\$ 798
Interquartile Range	\$ 680	50%	\$ 289
		25%	\$ 118

**Table 10f
Children
Targeted Case Management - Services Minutes
Fiscal Year 2017-18**

Statistic	Minutes	Quartile	Minutes
Number of Clients	91,158	100%	26,491
Mean	352	99%	3,605
Standard Deviation	747	95%	1,420
Median	124	90%	836
Mode	30	75%	336
Interquartile Range	286	50%	124
		25%	50

**Table 10g
Children
Historical Trends
Targeted Case Management - Services by Fiscal Year**

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	91,151	90,599	91,158	101,359
Number of Minutes	33,818,562	32,702,662	32,121,954	34,779,555
Minutes Per Client	371	361	352	343
Approved Amount	\$ 75,799,504	\$ 78,411,524	\$ 79,123,684	\$ 85,164,877

*FY 2018-19 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Children

Therapy and Other Service Activities

Therapy and Other Service Activities (formerly referred to as Mental Health Services):

Individual or group therapies and interventions are designed to provide a reduction of mental disability and restoration, improvement or maintenance of functioning consistent with the goals of learning, development, independent living, and enhanced self-sufficiency. These services are separate from those provided as components of adult residential services, crisis intervention, crisis stabilization, day rehabilitation, or day treatment intensive. Service activities may include, but are not limited to:

1. Assessment – A service activity designed to evaluate the current status of mental, emotional, or behavioral health. Assessment includes, but is not limited to, one or more of the following: mental status determination, analysis of the clinical history, analysis of relevant cultural issues and history, diagnosis, and the use of mental health testing procedures.
2. Plan Development – A service activity that consists of development of client plans, approval of client plans, and/or monitoring and recording of progress.
3. Therapy – A service activity that is a therapeutic intervention focusing primarily on symptom reduction as a means to reduce functional impairments. Therapy may be delivered to an individual or group and may include family therapy at which the client is present.
4. Rehabilitation – A service activity that includes, but is not limited to, assistance improving, maintaining or restoring functional skills, daily living skills, social and leisure skills, grooming and personal hygiene skills, meal preparation skills, and support resources; and/or obtaining medication education.
5. Collateral – A service activity involving a significant support person in the beneficiary's life for the purpose of addressing the mental health needs of the beneficiary in terms of achieving goals of the beneficiary's client plan. Collateral may include, but is not limited to consultation and training of the significant support person(s) to assist in better utilization of mental health services by the client, consultation and training of the significant support person(s) to assist in better understanding of mental illness, and family counseling with the significant support person(s) in achieving the goals of the client plan. The client may or may not be present for this service activity.

The distribution of use and expenditures of each service activity varies over time with changes in client needs.

Summary:

The forecast for Therapy and Other Service Activities indicates an increase in costs and clients.

Data Composition			
Actual	FY 2014-15	\$	1,115,414,074
Actual	FY 2015-16	\$	1,130,488,370
Actual	FY 2016-17	\$	1,371,725,066
Actual	FY 2017-18	\$	1,385,024,934
Actual + Forecast	FY 2018-19	\$	1,450,466,511
Forecast	FY 2019-20	\$	1,482,760,597
Forecast	FY 2020-21	\$	1,542,071,021
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 11a
Children
Clients Receiving Therapy and Other Service Activities by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 0 and 8 Years of Age	Clients Between 9 and 15 Years of Age	Clients Between 16 and 17 Years of Age	Clients Between 18 and 20 Years of Age
MHS	27.6%	47.1%	15.9%	9.4%
Total Children	22.4%	47.7%	17.9%	12.0%

Table 11b
Children
Clients Receiving Therapy and Other Service Activities by Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
MHS	17.6%	57.9%	10.8%	2.8%	0.5%	10.4%
Total Children	19.4%	54.3%	11.6%	2.9%	0.5%	11.3%

Table 11c
Children
Clients Receiving Therapy and Other Service Activities by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
MHS	46.4%	53.6%
Total Children	46.6%	53.4%

Table 11d
Other Services Received by Children Receiving
Therapy and Other Service Activities
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
THERAPY AND OTHER SERVICE ACTIVITIES	254,238	100.00%
TARGETED CASE MANAGEMENT	87,568	34.44%
MEDICATION SUPPORT	66,787	26.27%
ICC	19,902	7.83%
CRISIS INTERVENTION	18,732	7.37%
IHBS	12,439	4.89%
FFS-HOSPITAL INPATIENT	11,695	4.60%
CRISIS STABILIZATION	9,683	3.81%
THERAPEUTIC BEHAVIORAL SERVICES	7,970	3.13%
HOSPITAL INPATIENT	1,936	0.76%
PHF	912	0.36%
DAY REHABILITATION	373	0.15%
DAY TREATMENT INTENSIVE	356	0.14%
ADULT CRISIS RESIDENTIAL	328	0.13%
ADULT RESIDENTIAL	72	0.03%

Service Metrics:

**Table 11e
Children
Therapy and Other Service Activities Approved Amount
Fiscal Year 2017-18**

Statistic	Amount	Quartile	Amount
Number of Clients	254,238	100%	\$ 944,107
Mean	\$ 5,448	99%	\$ 39,586
Standard Deviation	\$ 9,815	95%	\$ 18,310
Median	\$ 2,869	90%	\$ 12,209
Mode	\$ 64	75%	\$ 6,402
Interquartile Range	\$ 5,336	50%	\$ 2,869
		25%	\$ 1,066

**Table 11f
Children
Therapy and Other Service Activities Minutes
Fiscal Year 2017-18**

Statistic	Minutes	Quartile	Minutes
Number of Clients	254,238	100%	79,308
Mean	1,692	99%	10,505
Standard Deviation	2,241	95%	5,506
Median	1,005	90%	3,887
Mode	120	75%	2,172
Interquartile Range	1,800	50%	1,005
		25%	372

**Table 11g
Children
Historical Trends
Therapy and Other Service Activities by Fiscal Year**

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	245,834	247,124	254,238	264,016
Number of Minutes	415,578,337	422,899,623	430,210,926	457,833,802
Minutes Per Client	1,690	1,711	1,692	1,734
Approved Amount	\$1,130,488,370	\$1,371,725,066	\$1,385,024,934	\$1,450,466,511

*FY 2018-19 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Children

Psychiatric Hospital Inpatient Services – FFS/MC Hospitals

Psychiatric Hospital Inpatient Services – FFS/MC Hospitals:

Psychiatric hospital inpatient services include both acute psychiatric hospital inpatient services and administrative day services. Acute psychiatric hospital inpatient services are provided to beneficiaries for whom the level of care provided in a hospital is medically necessary to diagnose or treat a covered mental illness. Administrative day services are hospital inpatient services provided to beneficiaries who were admitted to the hospital for an acute psychiatric hospital inpatient service and the beneficiary's stay at the hospital must be continued beyond the beneficiary's need for acute psychiatric hospital inpatient services due to lack of residential placement options at non-acute residential treatment facilities that meet the needs of the beneficiary.

Psychiatric hospital inpatient services are provided by Short-Doyle / Medi-Cal (SD/MC) hospitals and Fee-for-Service / Medi-Cal (FFS/MC) hospitals. Mental Health Plans (MHPs) claim reimbursement for the cost of psychiatric hospital inpatient services provided by Short-Doyle Medi-Cal hospitals through the Short-Doyle Medi-Cal (SD/MC) claiming system. FFS/MC hospitals claim reimbursement for the cost of psychiatric hospital inpatient services through the Fiscal Intermediary. MHPs are responsible for authorizing psychiatric hospital inpatient services reimbursed through either billing system. For SD/MC hospitals, the daily rate includes the cost of any needed professional services. The FFS/MC hospital daily rate does not include professional services, which are billed separately from the FFS/MC hospital inpatient services via the SD/MC claiming system.

Summary:

The forecast for Psychiatric Hospital Inpatient Services – FFS/MC Hospitals indicates an increase in costs and clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 79,940,531	13,020
Actual	FY 2015-16	\$ 84,703,606	12,591
Actual	FY 2016-17	\$ 93,421,137	13,784
Actual	FY 2017-18	\$ 106,245,252	14,154
Actual + Forecast	FY 2018-19	\$ 116,674,186	14,842
Forecast	FY 2019-20	\$ 124,230,452	15,528
Forecast	FY 2020-21	\$ 131,786,710	16,217
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 12a
Children
Clients Receiving Psychiatric Hospital Inpatient Services – FFS/MC Hospitals by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 0 and 8 Years of Age	Clients Between 9 and 15 Years of Age	Clients Between 16 and 17 Years of Age	Clients Between 18 and 20 Years of Age
HIS-FFS	1.6%	45.2%	25.9%	27.3%
Total Children	22.4%	47.7%	17.9%	12.0%

Table 12b
Children
Clients Receiving Psychiatric Hospital Inpatient Services - FFS/MC Hospitals by Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
HIS-FFS	21.0%	51.2%	10.4%	4.3%	0.5%	12.5%
Total Children	19.4%	54.3%	11.6%	2.9%	0.5%	11.3%

Table 12c
Children
Clients Receiving Psychiatric Hospital Inpatient Services - FFS/MC Hospitals by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
HIS-FFS	59.0%	41.0%
Total Children	46.6%	53.4%

Table 12d
Other Services Received by Children Receiving
Psychiatric Hospital Inpatient Services - FFS/MC Hospitals
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
FFS-HOSPITAL INPATIENT	14,193	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	11,695	82.40%
MEDICATION SUPPORT	8,769	61.78%
CRISIS INTERVENTION	6,913	48.71%
TARGETED CASE MANAGEMENT	6,003	42.30%
CRISIS STABILIZATION	3,966	27.94%
ICC	1,746	12.30%
THERAPEUTIC BEHAVIORAL SERVICES	1,154	8.13%
IHBS	1,102	7.76%
HOSPITAL INPATIENT	577	4.07%
PHF	315	2.22%
ADULT CRISIS RESIDENTIAL	181	1.28%
DAY TREATMENT INTENSIVE	61	0.43%
DAY REHABILITATION	52	0.37%
ADULT RESIDENTIAL	27	0.19%

Service Metrics:

Table 12e
Children
Psychiatric Hospital Inpatient Services - FFS/MC Hospitals
Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	14,193	100%	\$ 314,167
Mean	\$ 7,506	99%	\$ 50,076
Standard Deviation	\$ 10,136	95%	\$ 23,042
Median	\$ 4,752	90%	\$ 15,353
Mode	\$ 3,960	75%	\$ 8,140
Interquartile Range	\$ 5,084	50%	\$ 4,752
		25%	\$ 3,056

Table 12f
Children
Psychiatric Hospital Inpatient Service - FFS/MC Hospitals Days
Fiscal Year 2017-18

Statistic	Days	Quartile	Days
Number of Clients	14,193	100%	297
Mean	8	99%	51
Standard Deviation	11	95%	24
Median	5	90%	16
Mode	3	75%	8
Interquartile Range	5	50%	5
		25%	3

Table 12g
Children
Historical Trends
Psychiatric Hospital Inpatient Services - FFS/MC Hospitals by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	12,591	13,784	14,154	14,842
Number of Days	103,800	111,910	115,342	123,802
Days Per Client	8	8	8	8
Approved Amount	\$ 84,703,606	\$ 93,421,137	\$ 106,245,252	\$116,674,186

*FY 2018-19 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Children Therapeutic Behavioral Service

Therapeutic Behavioral Services (TBS):

Therapeutic behavioral services are intensive, individualized, short-term outpatient treatment interventions for beneficiaries up to age 21. Individuals receiving these services have serious emotional disturbances (SED), are experiencing a stressful transition or life crisis and need additional short-term, specific support services to accomplish outcomes specified in the written treatment plan.

Summary:

The forecast for Therapeutic Behavioral Services indicates a decrease in costs in FY 2019- 20 and an increase in FY 2020-21; and an increase in clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 96,303,568	8,154
Actual	FY 2015-16	\$ 91,070,052	7,964
Actual	FY 2016-17	\$ 91,369,548	7,896
Actual	FY 2017-18	\$ 89,718,431	8,140
Actual + Forecast	FY 2018-19	\$ 92,168,874	8,472
Forecast	FY 2019-20	\$ 90,896,107	8,540
Forecast	FY 2020-21	\$ 94,531,951	8,606
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates a decrease in dollars in FY 2019-20 and an increase in dollars in FY 2020-21; and an increase in clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 13a
Children
Clients Receiving Therapeutic Behavioral Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 0 and 8 Years of Age	Clients Between 9 and 15 Years of Age	Clients Between 16 and 17 Years of Age	Clients Between 18 and 20 Years of Age
TBS	28.7%	55.5%	13.4%	2.4%
Total Children	22.4%	47.7%	17.9%	12.0%

Table 13b
Children
Clients Receiving Therapeutic Behavioral Services by Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
TBS	22.4%	47.8%	14.8%	2.1%	0.4%	12.4%
Total Children	19.4%	54.3%	11.6%	2.9%	0.5%	11.3%

Table 13c
Children
Clients Receiving Therapeutic Behavioral Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
TBS	37.0%	63.0%
Total Children	46.6%	53.4%

Table 13d
Other Services Received by Children Receiving
Therapeutic Behavioral Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
THERAPEUTIC BEHAVIORAL SERVICES	8,140	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	7,970	97.91%
TARGETED CASE MANAGEMENT	5,566	68.38%
MEDICATION SUPPORT	5,342	65.63%
ICC	2,857	35.10%
CRISIS INTERVENTION	2,012	24.72%
IHBS	1,427	17.53%
CRISIS STABILIZATION	1,180	14.50%
FFS-HOSPITAL INPATIENT	1,154	14.18%
HOSPITAL INPATIENT	259	3.18%
PHF	127	1.56%
DAY TREATMENT INTENSIVE	84	1.03%
DAY REHABILITATION	80	0.98%
ADULT CRISIS RESIDENTIAL	7	0.09%
ADULT RESIDENTIAL	2	0.02%

Service Metrics:

**Table 13e
Children
Therapeutic Behavioral Services Approved Amount
Fiscal Year 2017-18**

Statistic	Amount	Quartile	Amount
Number of Clients	8,140	100%	\$ 263,930
Mean	\$ 11,022	99%	\$ 64,705
Standard Deviation	\$ 14,248	95%	\$ 34,085
Median	\$ 6,988	90%	\$ 25,012
Mode	\$ 240	75%	\$ 14,639
Interquartile Range	\$ 12,117	50%	\$ 6,988
		25%	\$ 2,522

**Table 13f
Children
Therapeutic Behavioral Services Minutes
Fiscal Year 2017-18**

Statistic	Minutes	Quartile	Minutes
Number of Clients	8,140	100%	48,077
Mean	4,523	99%	22,374
Standard Deviation	4,812	95%	13,845
Median	3,094	90%	10,305
Mode	120	75%	6,401
Interquartile Range	5,350	50%	3,094
		25%	1,051

**Table 13g
Children
Historical Trends
Therapeutic Behavioral Services by Fiscal Year**

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	7,964	7,896	8,140	8,472
Number of Minutes	37,484,511	35,774,060	36,813,391	38,973,867
Minutes Per Client	4,707	4,531	4,523	4,600
Approved Amount	\$ 91,070,052	\$ 91,369,548	\$ 89,718,431	\$ 92,168,874

*FY 2018-19 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Children Intensive Care Coordination

Intensive Care Coordination (ICC):

Intensive care coordination is a targeted case management service that facilitates assessment of, care planning for and coordination of services, including urgent services for all children and youth under the age of 21 who are eligible for full scope Medi-Cal benefits and who meet medical necessity criteria for these services. ICC services are provided within the Child and Family Team (CFT) and in accordance with the Core Practice Model (CPM). ICC must be used to facilitate implementation of the cross-system/multi-agency collaborative services approach described in the CPM. ICC service components include assessing, service planning and implementation; monitoring and adapting, and transition. The CFT is comprised of the child/youth and family and all ancillary individuals who work together to develop and implement the client plan and are responsible for supporting the child/youth and family in attaining their goals. There must be an ICC coordinator who:

- Oversees that medically necessary services are accessed, coordinated and delivered in a strength-based, individualized, family/youth driven and culturally and linguistically competent manner and that services and supports are guided by the needs of the child/youth;
- Facilitates a collaborative relationship among the child/youth, his/her family and involved child-serving systems;
- Supports the parent/caregiver in meeting their child/youth's needs;
- Helps establish the CFT and provides ongoing support; and
- Organizes and matches care across providers and child serving systems to allow the child/youth to be served in his/her community

Summary:

The forecast for Intensive Care Coordination Services indicates an increase in costs and clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 33,804,873	10,197
Actual	FY 2015-16	\$ 38,396,698	11,693
Actual	FY 2016-17	\$ 49,331,341	15,196
Actual	FY 2017-18	\$ 59,291,220	20,411
Actual + Forecast	FY 2018-19	\$ 71,169,550	27,506
Forecast	FY 2019-20	\$ 81,386,990	31,661
Forecast	FY 2020-21	\$ 84,642,470	35,813
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 14a
Children
Clients Receiving Intensive Care Coordination - Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 0 and 8 Years of Age	Clients Between 9 and 15 Years of Age	Clients Between 16 and 17 Years of Age	Clients Between 18 and 20 Years of Age
ICC	24.4%	48.9%	19.8%	6.9%
Total Children	22.4%	47.7%	17.9%	12.0%

Table 14b
Children
Clients Receiving Intensive Care Coordination - Services by Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
ICC	23.2%	45.8%	17.2%	1.7%	0.8%	11.3%
Total Children	19.4%	54.3%	11.6%	2.9%	0.5%	11.3%

Table 14c
Children
Clients Receiving Intensive Care Coordination - Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
ICC	46.8%	53.2%
Total Children	46.6%	53.4%

Table 14d
Other Services Received by Children Receiving
Intensive Care Coordination - Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
ICC	20,411	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	19,902	97.51%
IHBS	11,526	56.47%
TARGETED CASE MANAGEMENT	11,016	53.97%
MEDICATION SUPPORT	9,237	45.26%
CRISIS INTERVENTION	3,499	17.14%
THERAPEUTIC BEHAVIORAL SERVICES	2,857	14.00%
CRISIS STABILIZATION	1,867	9.15%
FFS-HOSPITAL INPATIENT	1,746	8.55%
HOSPITAL INPATIENT	543	2.66%
DAY REHABILITATION	211	1.03%
DAY TREATMENT INTENSIVE	94	0.46%
PHF	71	0.35%
ADULT CRISIS RESIDENTIAL	23	0.11%
ADULT RESIDENTIAL	6	0.03%

Service Metrics:

Table 14e
Children
Intensive Care Coordination - Services Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	20,411	100%	\$ 78,177
Mean	\$ 2,905	99%	\$ 20,816
Standard Deviation	\$ 4,509	95%	\$ 11,756
Median	\$ 1,121	90%	\$ 8,099
Mode	\$ 79	75%	\$ 3,526
Interquartile Range	\$ 3,190	50%	\$ 1,121
		25%	\$ 336

Table 14f
Children
Intensive Care Coordination - Services Minutes
Fiscal Year 2017-18

Statistic	Minutes	Quartile	Minutes
Number of Clients	20,411	100%	27,121
Mean	1,344	99%	9,217
Standard Deviation	1,982	90%	3,792
Median	521	75%	1,695
Mode	60	50%	521
Interquartile Range	1,541	25%	154

Table 14g
Children
Historical Trends
Intensive Care Coordination - Services by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	11,693	15,196	20,411	27,506
Number of Minutes	19,299,558	23,403,638	27,430,326	33,282,806
Minutes Per Client	1,651	1,540	1,344	1,210
Approved Amount	\$ 38,396,698	\$ 49,331,341	\$ 59,291,220	\$ 71,169,550

* FY 2018-19 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Children

Intensive Home Based Services

Intensive Home Based Services (IHBS):

Intensive home based services are individualized, strength-based interventions designed to ameliorate mental health conditions that interfere with a child/youth's functioning and are aimed at helping the child/youth build skills necessary for successful functioning in the home and community and improving the child/youth's family ability to help the child/youth successfully function in the home and community. IHBS services are provided within the Child and Family Team (CFT) and in accordance with the Core Practice Model (CPM). The CFT participates in the development of the child's and family's overall service plan which may include IHBS. Service activities may include, but are not limited to assessment, plan development, therapy, rehabilitation and collateral.

Summary:

The forecast for Intensive Home Based Services indicates an increase in costs and clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 47,726,896	7,846
Actual	FY 2015-16	\$ 56,521,157	8,843
Actual	FY 2016-17	\$ 69,012,343	10,886
Actual	FY 2017-18	\$ 79,715,697	12,732
Actual + Forecast	FY 2018-19	\$ 92,976,083	16,074
Forecast	FY 2019-20	\$ 105,643,352	18,239
Forecast	FY 2020-21	\$ 109,869,086	20,404
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, counties still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 15a
Children
Clients Receiving Intensive Home Based Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 0 and 8 Years of Age	Clients Between 9 and 15 Years of Age	Clients Between 16 and 17 Years of Age	Clients Between 18 and 20 Years of Age
IHBS	24.6%	50.5%	18.5%	6.4%
Total Children	22.4%	47.7%	17.9%	12.0%

Table 15b
Children
Clients Receiving Intensive Home Based Services by Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
IHBS	19.8%	49.3%	17.4%	1.4%	0.6%	11.4%
Total Children	19.4%	54.3%	11.6%	2.9%	0.5%	11.3%

Table 15c
Children
Clients Receiving Intensive Home Based Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
IHBS	46.5%	53.5%
Total Children	46.6%	53.4%

Table 15d
Other Services Received by Children Receiving
Intensive Home Based Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
IHBS	12,732	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	12,439	97.70%
ICC	11,526	90.53%
TARGETED CASE MANAGEMENT	6,629	52.07%
MEDICATION SUPPORT	5,923	46.52%
CRISIS INTERVENTION	2,439	19.16%
THERAPEUTIC BEHAVIORAL SERVICES	1,427	11.21%
CRISIS STABILIZATION	1,156	9.08%
FFS-HOSPITAL INPATIENT	1,102	8.66%
HOSPITAL INPATIENT	369	2.90%
DAY REHABILITATION	86	0.68%
DAY TREATMENT INTENSIVE	62	0.49%
PHF	36	0.28%
ADULT CRISIS RESIDENTIAL	8	0.06%
ADULT RESIDENTIAL	3	0.02%

Service Metrics:

**Table 15e
Children
Intensive Home Based Services Approved Amount
Fiscal Year 2017-18**

Statistic	Amount	Quartile	Amount
Number of Clients	12,732	100%	\$ 398,524
Mean	\$ 6,261	99%	\$ 47,732
Standard Deviation	\$ 12,350	95%	\$ 19,750
Median	\$ 3,121	90%	\$ 14,091
Mode	\$ 259	75%	\$ 7,496
Interquartile Range	\$ 6,496	50%	\$ 3,121
		25%	\$ 1,000

**Table 15f
Children
Intensive Home Based Services Minutes
Fiscal Year 2017-18**

Statistic	Minutes	Quartile	Minutes
Number of Clients	12,732	100%	54,538
Mean	2,149	99%	12,359
Standard Deviation	2,759	95%	7,076
Median	1,229	90%	5,258
Mode	100	75%	2,924
Interquartile Range	2,534	50%	1,229
		25%	390

**Table 15g
Children
Historical Trends
Intensive Home Based Services by Fiscal Year**

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	8,843	10,886	12,732	16,074
Number of Minutes	21,052,937	24,245,802	27,355,583	33,000,262
Minutes Per Client	2,381	2,227	2,149	2,053
Approved Amount	\$ 56,521,157	\$ 69,012,343	\$ 79,715,697	\$ 92,976,083

* FY 2018-19 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Detailed Service Type Forecasts and Utilization Metrics: Adults Services

Adults

Adult Crisis Residential Services

Adult Crisis Residential Services (CRS):

Adult crisis residential services provide an alternative to acute psychiatric hospital inpatient services for beneficiaries who otherwise would require hospitalization. The CRS programs for adults provide normalized living environments, integrated into residential communities. The services follow a social rehabilitation model that integrates aspects of emergency psychiatric care, psychosocial rehabilitation, milieu therapy, case management and practical social work.

Summary:

The forecast for Adult Crisis Residential Services indicates an increase in costs and clients.

Data Composition			
Actual	FY 2014-15	\$ 40,892,508	7,306
Actual	FY 2015-16	\$ 46,763,571	7,343
Actual	FY 2016-17	\$ 52,711,295	8,040
Actual	FY 2017-18	\$ 57,723,521	8,622
Actual + Forecast	FY 2018-19	\$ 60,691,477	9,666
Forecast	FY 2019-20	\$ 65,127,701	10,500
Forecast	FY 2020-21	\$ 69,686,640	11,331
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 1a
Adults
Clients Receiving Adult Crisis Residential Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 21 and 59 Years of Age	Clients Between 60 and 64 Years of Age	Clients 65 Years of Age and Older
ACR	93.1%	5.0%	1.9%
Total Adults	85.4%	8.6%	6.0%

Table 1b
Adults
Clients Receiving Adult Crisis Residential Services by Race / Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
ACR	41.0%	15.4%	14.1%	4.1%	1.0%	24.4%
Total Adults	34.1%	25.1%	15.1%	6.4%	0.8%	18.7%

Table 1c
Adults
Clients Receiving Adult Crisis Residential Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
ACR	41.2%	58.8%
Total Adults	50.4%	49.6%

Table 1d
Other Services Received by Adults Receiving
Adult Crisis Residential Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
ADULT CRISIS RESIDENTIAL	8,622	100.00%
MEDICATION SUPPORT	7,849	91.03%
THERAPY AND OTHER SERVICE ACTIVITIES	6,471	75.05%
TARGETED CASE MANAGEMENT	5,323	61.74%
CRISIS STABILIZATION	5,234	60.71%
CRISIS INTERVENTION	3,331	38.63%
FFS-HOSPITAL INPATIENT	2,338	27.12%
HOSPITAL INPATIENT	1,349	15.65%
PHF	746	8.65%
ADULT RESIDENTIAL	666	7.72%
DAY REHABILITATION	158	1.83%
DAY TREATMENT INTENSIVE	48	0.56%

Service Metrics:

Table 1e
Adults
Adult Crisis Residential Services Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	8,622	100%	\$ 67,395
Mean	\$ 6,695	99%	\$ 36,002
Standard Deviation	\$ 7,054	95%	\$ 19,684
Median	\$ 4,611	90%	\$ 14,148
Mode	\$ 3,216	75%	\$ 8,592
Interquartile Range	\$ 6,312	50%	\$ 4,611
		25%	\$ 2,280

Table 1f
Adults
Adult Crisis Residential Services Days
Fiscal Year 2017-18

Statistic	Amount	Quartile	Days
Number of Clients	8,622	100%	221
Mean	18	99%	90
Standard Deviation	18	95%	52
Median	14	90%	37
Mode	14	75%	24
Interquartile Range	17	50%	14
		25%	7

Table 1g
Adults
Historical Trends
Adult Crisis Residential Services by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	7,343	8,040	8,622	9,666
Number of Days	130,265	141,753	157,559	155,647
Days Per Client	18	18	18	16
Approved Amount	\$ 46,763,571	\$ 52,711,295	\$ 57,723,521	\$ 60,691,477

*FY 2017-18 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Adults

Adult Residential Treatment Services

Adult Residential Treatment Services:

Adult Residential Treatment Services are rehabilitative services provided in a non-institutional, residential setting for beneficiaries who would be at risk of hospitalization or other institutional placement if they were not receiving residential treatment services. The services include a wide range of activities and services that support beneficiaries in their effort to restore, maintain, and apply interpersonal and independent living skills and to access community support systems. Service activities may include assessment, plan development, therapy, rehabilitation, and collateral. Collateral addresses the mental health needs of the beneficiary to provide coordination with significant others and treatment providers.

Summary:

The forecast for Adult Residential Services indicates an increase in costs and clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 23,623,998	1,541
Actual	FY 2015-16	\$ 25,462,736	1,514
Actual	FY 2016-17	\$ 29,400,648	1,586
Actual	FY 2017-18	\$ 31,450,794	1,529
Actual + Forecast	FY 2018-19	\$ 33,893,731	1,610
Forecast	FY 2019-20	\$ 36,367,645	1,670
Forecast	FY 2020-21	\$ 38,913,380	1,730
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, counties still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 2a
Adults
Clients Receiving Adult Residential Treatment Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 21 and 59 Years of Age	Clients Between 60 and 64 Years of Age	Clients 65 Years of Age and Older
AR	93.1%	4.8%	2.2%
Total Adults	85.4%	8.6%	6.0%

Table 2b
Adults
Clients Receiving Adult Residential Treatment Services by Race / Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
AR	33.4%	11.5%	12.1%	5.1%	0.7%	37.2%
Total Adults	34.1%	25.1%	15.1%	6.4%	0.8%	18.7%

Table 2c
Adults
Clients Receiving Adult Residential Treatment Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
AR	36.8%	63.2%
Total Adults	50.4%	49.6%

Table 2d
Other Services Received by Adults Receiving
Adult Residential Treatment Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
ADULT RESIDENTIAL	1,529	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	1,309	85.61%
MEDICATION SUPPORT	1,266	82.80%
TARGETED CASE MANAGEMENT	1,206	78.88%
CRISIS STABILIZATION	756	49.44%
ADULT CRISIS RESIDENTIAL	666	43.56%
CRISIS INTERVENTION	571	37.34%
HOSPITAL INPATIENT	222	14.52%
FFS-HOSPITAL INPATIENT	210	13.73%
DAY REHABILITATION	133	8.70%
PHF	93	6.08%
DAY TREATMENT INTENSIVE	11	0.72%

Service Metrics:

Table 2e
Adults
Adult Residential Treatment Services Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	1,529	100%	\$ 170,458
Mean	\$ 20,570	99%	\$ 91,396
Standard Deviation	\$ 21,048	95%	\$ 57,830
Median	\$ 15,120	90%	\$ 46,978
Mode	\$ 25,470	75%	\$ 28,000
Interquartile Range	\$ 22,340	50%	\$ 15,120
		25%	\$ 5,660

Table 2f
Adults
Adult Residential Treatment Services Days
Fiscal Year 2017-18

Statistic	Days	Quartile	Days
Number of Clients	1,529	100%	365
Mean	99	99%	362
Standard Deviation	88	95%	293
Median	78	90%	235
Mode	2	75%	142
Interquartile Range	113	50%	78
		25%	29

Table 2g
Adults
Historical Trends
Adult Residential Treatment Services by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	1,514	1,586	1,529	1,610
Number of Days	135,244	148,701	151,621	163,302
Days Per Client	89	94	99	101
Approved Amount	\$ 25,462,736	\$ 29,400,648	\$ 31,450,794	\$ 33,893,731

*FY 2017-18 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Adults Crisis Intervention

Crisis Intervention:

Crisis intervention services last less than 24 hours and are for, or on behalf of, a beneficiary for a condition that requires more timely response than a regularly scheduled visit. Service activities include, but are not limited to, assessment, collateral and therapy. Crisis Intervention services may either be face-to-face or by telephone with the beneficiary or the beneficiary's significant support person and may be provided anywhere in the community.

Summary:

The forecast for Crisis Intervention indicates an increase in costs and clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 48,683,642	46,625
Actual	FY 2015-16	\$ 54,604,832	47,553
Actual	FY 2016-17	\$ 66,941,445	51,961
Actual	FY 2017-18	\$ 67,813,905	49,982
Actual + Forecast	FY 2018-19	\$ 76,779,222	52,316
Forecast	FY 2019-20	\$ 82,386,949	55,815
Forecast	FY 2020-21	\$ 88,154,035	59,311
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 3a
Adults
Clients Receiving Crisis Intervention Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 21 and 59 Years of Age	Clients Between 60 and 64 Years of Age	Clients 65 Years of Age and Older
CI	90.1%	5.8%	4.2%
Total Adults	85.4%	8.6%	6.0%

Table 3b
Adults
Clients Receiving Crisis Intervention Services by Race / Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
CI	40.0%	24.9%	13.0%	4.0%	1.0%	17.1%
Total Adults	34.1%	25.1%	15.1%	6.4%	0.8%	18.7%

Table 3c
Adults
Clients Receiving Crisis Intervention Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
CI	47.2%	52.8%
Total Adults	50.4%	49.6%

Table 3d
Other Services Received by Adults Receiving
Crisis Intervention Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
CRISIS INTERVENTION	49,982	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	31,780	63.58%
MEDICATION SUPPORT	29,243	58.51%
TARGETED CASE MANAGEMENT	24,489	49.00%
CRISIS STABILIZATION	16,008	32.03%
FFS-HOSPITAL INPATIENT	10,373	20.75%
HOSPITAL INPATIENT	3,987	7.98%
PHF	3,662	7.33%
ADULT CRISIS RESIDENTIAL	3,331	6.66%
ADULT RESIDENTIAL	571	1.14%
DAY REHABILITATION	103	0.21%
DAY TREATMENT INTENSIVE	68	0.14%

Service Metrics:

Table 3e
Adults
Crisis Intervention Services Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	49,982	100%	\$ 42,905
Mean	\$ 1,357	99%	\$ 8,486
Standard Deviation	\$ 1,764	95%	\$ 4,176
Median	\$ 821	90%	\$ 2,762
Mode	\$ 2,611	75%	\$ 1,631
Interquartile Range	\$ 1,237	50%	\$ 821
		25%	\$ 394

Table 3f
Adults
Crisis Intervention Services Minutes
Fiscal Year 2017-18

Statistic	Minutes	Quartile	Minutes
Number of Clients	49,982	100%	11,227
Mean	261	99%	1,541
Standard Deviation	321	95%	787
Median	168	90%	525
Mode	480	75%	307
Interquartile Range	217	50%	168
		25%	90

Table 3g
Adults
Historical Trends
Crisis Intervention Services by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	47,553	51,961	49,982	52,316
Number of Minutes	11,354,905	13,146,470	13,035,039	14,387,979
Minutes Per Client	239	253	261	275
Approved Amount	\$ 54,604,832	\$ 66,941,445	\$ 67,813,905	\$ 76,779,222

*FY 2017-18 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Adults Crisis Stabilization

Crisis Stabilization:

Crisis stabilization services last less than 24 hours and are for, or on behalf of, a beneficiary for a condition that requires a timelier response than a regularly scheduled visit. Service activities include but are not limited to one or more of the following: assessment, collateral, and therapy. Collateral addresses the mental health needs of the beneficiary to provide coordination with significant others and treatment providers.

Summary:

The forecast for Crisis Stabilization indicates an increase in costs and clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 127,562,659	47,568
Actual	FY 2015-16	\$ 141,492,027	50,576
Actual	FY 2016-17	\$ 154,074,877	54,763
Actual	FY 2017-18	\$ 172,596,592	56,187
Actual + Forecast	FY 2018-19	\$ 177,386,652	54,351
Forecast	FY 2019-20	\$ 190,350,135	58,665
Forecast	FY 2020-21	\$ 203,674,645	62,976
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 4a
Adults
Clients Receiving Crisis Stabilization Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 21 and 59 Years of Age	Clients Between 60 and 64 Years of Age	Clients 65 Years of Age and Older
CS	93.5%	4.3%	2.2%
Total Adults	85.4%	8.6%	6.0%

Table 4b
Adults
Clients Receiving Crisis Stabilization Services by Race / Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
CS	31.6%	25.5%	18.4%	4.7%	0.8%	19.0%
Total Adults	34.1%	25.1%	15.1%	6.4%	0.8%	18.7%

Table 4c
Adults
Clients Receiving Crisis Stabilization Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
CS	42.3%	57.7%
Total Adults	50.4%	49.6%

Table 4d
Other Services Received by Adults Receiving
Crisis Stabilization Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
CRISIS STABILIZATION	56,187	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	28,693	51.07%
MEDICATION SUPPORT	25,892	46.08%
TARGETED CASE MANAGEMENT	18,102	32.22%
CRISIS INTERVENTION	16,008	28.49%
FFS-HOSPITAL INPATIENT	10,410	18.53%
HOSPITAL INPATIENT	5,794	10.31%
ADULT CRISIS RESIDENTIAL	5,234	9.32%
PHF	3,177	5.65%
ADULT RESIDENTIAL	756	1.35%
DAY REHABILITATION	220	0.39%
DAY TREATMENT INTENSIVE	4	0.01%

Service Metrics:

Table 4e
Adults
Crisis Stabilization Services Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	56,187	100%	\$ 351,106
Mean	\$ 3,072	99%	\$ 28,644
Standard Deviation	\$ 7,106	95%	\$ 9,765
Median	\$ 1,695	90%	\$ 6,500
Mode	\$ 1,891	75%	\$ 2,890
Interquartile Range	\$ 2,266	50%	\$ 1,695
		25%	\$ 624

Table 4f
Adults
Crisis Stabilization Services Hours
Fiscal Year 2017-18

Statistic	Hours	Quartile	Hours
Number of Clients	56,187	100%	1,058
Mean	24	99%	161
Standard Deviation	34	95%	75
Median	19	90%	50
Mode	20	75%	23
Interquartile Range	16	50%	19
		25%	7

Table 4g
Adults
Historical Trends
Crisis Stabilization Services by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	50,576	54,763	56,187	54,351
Number of Hours	1,251,227	1,323,311	1,359,428	1,453,210
Hours Per Client	25	24	24	27
Approved Amount	\$141,492,027	\$154,074,877	\$172,596,592	\$177,386,652

*FY 2017-18 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Adults

Day Rehabilitation

Day Rehabilitation:

Day rehabilitation services are a structured program of rehabilitation and therapy with services to improve, maintain or restore personal independence and functioning, consistent with requirements for learning and development and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to assessment, plan development, therapy, rehabilitation and collateral.

Summary:

The forecast for Day Rehabilitation indicates an increase in costs and clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 8,702,698	1,248
Actual	FY 2015-16	\$ 4,644,830	635
Actual	FY 2016-17	\$ 4,183,574	580
Actual	FY 2017-18	\$ 4,133,912	539
Actual + Forecast	FY 2018-19	\$ 4,373,375	646
Forecast	FY 2019-20	\$ 4,693,015	650
Forecast	FY 2020-21	\$ 5,021,526	653
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 5a
Adults
Clients Receiving Day Rehabilitation- All Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 21 and 59 Years of Age	Clients Between 60 and 64 Years of Age	Clients 65 Years of Age and Older
DR	85.4%	7.7%	6.9%
Total Adults	85.4%	8.6%	6.0%

Table 5b
Adults
Clients Receiving Day Rehabilitation- All Services by Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
DR	35.0%	13.6%	20.2%	6.3%	0.7%	24.2%
Total Adults	34.1%	25.1%	15.1%	6.4%	0.8%	18.7%

Table 5c
Adults
Clients Receiving Day Rehabilitation - All Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
DR	46.5%	53.5%
Total Adults	50.4%	49.6%

Table 5d
Other Services Received by Adults Receiving
Day Rehabilitation All Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
DAY REHABILITATION	539	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	406	75.32%
MEDICATION SUPPORT	404	74.95%
TARGETED CASE MANAGEMENT	361	66.98%
CRISIS STABILIZATION	220	40.82%
ADULT CRISIS RESIDENTIAL	158	29.31%
ADULT RESIDENTIAL	133	24.68%
CRISIS INTERVENTION	103	19.11%
HOSPITAL INPATIENT	83	15.40%
FFS-HOSPITAL INPATIENT	48	8.91%
DAY TREATMENT INTENSIVE	12	2.23%
PHF	1	0.19%

Service Metrics:

Table 5e
Adults
Day Rehabilitation All Services Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	539	100%	\$ 65,171
Mean	\$ 7,670	99%	\$ 55,965
Standard Deviation	\$ 10,494	95%	\$ 28,938
Median	\$ 3,793	90%	\$ 19,560
Mode	\$ 72	75%	\$ 9,845
Interquartile Range	\$ 8,454	50%	\$ 3,793
		25%	\$ 1,391

Table 5f
Adults
Day Rehabilitation All Services Hours
Fiscal Year 2017-18

Statistic	Hours	Quartile	Hours
Number of Clients	539	100%	1,440
Mean	230	99%	1,074
Standard Deviation	244	95%	792
Median	150	90%	582
Mode	24	75%	300
Interquartile Range	248	50%	150
		25%	52

Table 5g
Adults
Historical Trends
Day Rehabilitation All Services by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Hours per Client	635	580	539	646
Number of Hours	149,804	128,290	123,992	140,335
Days Per Client	236	221	230	217
Approved Amount	\$ 4,644,830	\$ 4,183,574	\$ 4,133,912	\$ 4,373,375

*FY 2017-18 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Adults

Day Treatment Intensive

Day Treatment Intensive:

Day treatment intensive services are a structured, multi-disciplinary program of therapy that may be used as an alternative to hospitalization, or to avoid placement in a more restrictive setting, or to maintain the client in a community setting and which provides services to a distinct group of beneficiaries who receive services for a minimum of three hours per day (half-day) or more than four hours per day (full-day). Service activities may include, but are not limited to, assessment, plan development, therapy, rehabilitation and collateral.

Summary:

The forecast for Day Treatment Intensive Services indicates an increase in costs and a decrease in clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 0	0
Actual	FY 2015-16	\$ 2,852	1
Actual	FY 2016-17	\$ 445,161	135
Actual + Forecast	FY 2017-18	\$ 536,768	130
Forecast	FY 2018-19	\$ 616,686	128
Forecast	FY 2019-20	\$ 661,592	121
Forecast	FY 2020-21	\$ 707,904	113
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and a decrease in clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 6a
Adults
Clients Receiving Day Treatment Intensive – All Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 21 and 59 Years of Age	Clients Between 60 and 64 Years of Age	Clients 65 Years of Age and Older
DTI	95.5%	2.3%	2.3%
Total Adults	85.4%	8.6%	6.0%

Table 6b
Adults
Clients Receiving Day Treatment Intensive – All Services by Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
DTI	35.3%	34.6%	6.0%	4.5%	0.0%	19.5%
Total Adults	34.1%	25.1%	15.1%	6.4%	0.8%	18.7%

Table 6c
Adults
Clients Receiving Day Treatment Intensive – All Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
DTI	56.4%	43.6%
Total Adults	50.4%	49.6%

Table 6d
Adults
Other Services Received by Adults Receiving
Day Treatment Intensive All Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
DAY TREATMENT INTENSIVE	130	100.00%
TARGETED CASE MANAGEMENT	129	99.23%
MEDICATION SUPPORT	128	98.46%
THERAPY AND OTHER SERVICE ACTIVITIES	127	97.69%
CRISIS INTERVENTION	68	52.31%
ADULT CRISIS RESIDENTIAL	48	36.92%
HOSPITAL INPATIENT	26	20.00%
FFS-HOSPITAL INPATIENT	23	17.69%
DAY REHABILITATION	12	9.23%
ADULT RESIDENTIAL	11	8.46%
CRISIS STABILIZATION	4	3.08%

Service Metrics:

Table 6e
Adults
Day Treatment Intensive All Services Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	130	100%	\$ 22,177
Mean	\$ 4,129	99%	\$ 17,225
Standard Deviation	\$ 3,725	95%	\$ 11,411
Median	\$ 3,230	90%	\$ 9,043
Mode	\$ 3,230	75%	\$ 6,029
Interquartile Range	\$ 4,952	50%	\$ 3,230
		25%	\$ 1,077

Table 6f
Adults
Day Treatment Intensive All Services Hours
Fiscal Year 2017-18

Statistic	Hours	Quartile	Hours
Number of Clients	130	100%	618
Mean	115	99%	480
Standard Deviation	104	95%	318
Median	90	90%	252
Mode	90	75%	168
Interquartile Range	138	50%	90
		25%	30

Table 6g
Adults
Historical Trends
Day Treatment Intensive All Services by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Hours per Client	1	135	130	128
Number of Hours	65	11,928	14,958	15,856
Days per Client	65	88	115	124
Approved Amount	\$2,852	\$445,161	\$536,768	\$616,686

*FY 2017-18 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Adults

Medication Support

Medication Support:

Medication support services include prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals that are necessary to alleviate the symptoms of mental illness. Service activities may include but are not limited to evaluation of the need for medication; evaluation of clinical effectiveness and side effects; obtaining informed consent; instruction in the use, risks and benefits of, and alternatives for, medication; collateral and plan development related to the delivery of service and/or assessment for the client; prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals; and medication education.

Summary:

The forecast for Medication Support indicates an increase in costs and clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 332,121,212	226,110
Actual	FY 2015-16	\$ 359,796,991	228,853
Actual	FY 2016-17	\$ 384,463,960	225,621
Actual	FY 2017-18	\$ 416,796,656	221,605
Actual + Forecast	FY 2018-19	\$ 436,519,724	221,715
Forecast	FY 2019-20	\$ 468,396,823	226,203
Forecast	FY 2020-21	\$ 501,184,601	230,691
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 7a
Adults
Clients Receiving Medication Support Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 21 and 59 Years of Age	Clients Between 60 and 64 Years of Age	Clients 65 Years of Age and Older
MS	83.1%	10.3%	6.6%
Total Adults	85.4%	8.6%	6.0%

Table 7b
Adults
Clients Receiving Medication Support Services by Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
MS	33.7%	24.6%	14.7%	7.6%	0.7%	18.7%
Total Adults	34.1%	25.1%	15.1%	6.4%	0.8%	18.7%

Table 7c
Adults
Clients Receiving Medication Support Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
MS	52.0%	48.0%
Total Adults	50.4%	49.6%

Table 7d
Other Services Received by Adults Receiving
Medication Support Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
MEDICATION SUPPORT	221,605	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	166,577	75.17%
TARGETED CASE MANAGEMENT	102,607	46.30%
CRISIS INTERVENTION	29,243	13.20%
CRISIS STABILIZATION	25,892	11.68%
FFS-HOSPITAL INPATIENT	16,100	7.27%
ADULT CRISIS RESIDENTIAL	7,849	3.54%
HOSPITAL INPATIENT	5,811	2.62%
PHF	3,430	1.55%
ADULT RESIDENTIAL	1,266	0.57%
DAY REHABILITATION	404	0.18%
DAY TREATMENT INTENSIVE	128	0.06%

Service Metrics:

Table 7e
Adults
Medication Support Services Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	221,605	100%	\$ 159,576
Mean	\$ 1,881	99%	\$ 12,961
Standard Deviation	\$ 3,662	95%	\$ 5,700
Median	\$ 1,095	90%	\$ 3,861
Mode	\$ 606	75%	\$ 2,059
Interquartile Range	\$ 1,520	50%	\$ 1,095
		25%	\$ 538

Table 7f
Adults
Medication Support Services Minutes
Fiscal Year 2017-18

Statistic	Minutes	Quartile	Minutes
Number of Clients	221,605	100%	21,919
Mean	293	99%	1,874
Standard Deviation	400	95%	898
Median	184	90%	618
Mode	90	75%	334
Interquartile Range	235	50%	184
		25%	99

Table 7g
Adults
Historical Trends
Medication Support Services by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	228,853	225,621	221,605	221,715
Number of Minutes	63,860,509	64,253,828	64,850,725	70,328,459
Minutes Per Client	279	285	293	317
Approved Amount	\$359,796,991	\$384,463,960	\$416,796,656	\$436,519,724

*FY 2017-18 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Adults

Psychiatric Health Facility Services

Psychiatric Health Facility (PHF):

"Psychiatric Health Facility" means a facility licensed under the provisions beginning with Section 77001 of Chapter 9, Division 5, Title 22 of the California Code of Regulations.

"Psychiatric Health Facility Services" are therapeutic and/or rehabilitative services provided in a psychiatric health facility on an inpatient basis to beneficiaries who need acute care, which meets the criteria of Section 1820.205 of Chapter 11, Division 1, Title 9 of the California Code of Regulations, and whose physical health needs can be met in an affiliated general acute care hospital or in outpatient settings. These services are separate from those categorized as "Psychiatric Hospital Inpatient".

Summary:

The forecast for Psychiatric Health Facility Services indicates an increase in costs and clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 48,468,023	5,907
Actual	FY 2015-16	\$ 48,086,974	5,837
Actual	FY 2016-17	\$ 52,936,888	5,498
Actual	FY 2017-18	\$ 58,849,838	5,615
Actual + Forecast	FY 2018-19	\$ 60,920,622	5,424
Forecast	FY 2019-20	\$ 65,360,348	5,718
Forecast	FY 2020-21	\$ 69,935,572	6,009
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 8a
Adults
Clients Receiving Psychiatric Health Facility Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 21 and 59 Years of Age	Clients Between 60 and 64 Years of Age	Clients 65 Years of Age and Older
PHF	95.4%	3.8%	0.8%
Total Adults	85.4%	8.6%	6.0%

Table 8b
Adults
Clients Receiving Psychiatric Health Facility Services by Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
PHF	43.8%	20.6%	10.9%	4.1%	1.3%	19.3%
Total Adults	34.1%	25.1%	15.1%	6.4%	0.8%	18.7%

Table 8c
Adults
Clients Receiving Psychiatric Health Facility Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
PHF	44.8%	55.2%
Total Adults	50.4%	49.6%

Table 8d
Other Services Received by Adults Receiving
Psychiatric Health Facility Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
PHF	5,615	100.00%
CRISIS INTERVENTION	3,662	65.22%
TARGETED CASE MANAGEMENT	3,514	62.58%
MEDICATION SUPPORT	3,430	61.09%
THERAPY AND OTHER SERVICE ACTIVITIES	3,409	60.71%
CRISIS STABILIZATION	3,177	56.58%
FFS-HOSPITAL INPATIENT	897	15.98%
ADULT CRISIS RESIDENTIAL	746	13.29%
HOSPITAL INPATIENT	127	2.26%
ADULT RESIDENTIAL	93	1.66%
DAY REHABILITATION	1	0.02%

Service Metrics:

**Table 8e
Adults**

**Psychiatric Health Facility Services Approved Amount
Fiscal Year 2017-18**

Statistic	Amount	Quartile	Amount
Number of Clients	5,615	100%	\$ 232,638
Mean	\$ 10,481	99%	\$ 77,704
Standard Deviation	\$ 15,585	95%	\$ 36,060
Median	\$ 5,490	90%	\$ 23,262
Mode	\$ 2,640	75%	\$ 11,521
Interquartile Range	\$ 8,860	50%	\$ 5,490
		25%	\$ 2,661

**Table 8f
Adults**

**Psychiatric Health Facility Services Days
Fiscal Year 2017-18**

Statistic	Days	Quartile	Days
Number of Clients	5,615	100%	282
Mean	12	99%	98
Standard Deviation	19	95%	44
Median	7	90%	28
Mode	2	75%	14
Interquartile Range	11	50%	7
		25%	3

**Table 8g
Adults**

**Historical Trends
Psychiatric Health Facility Services by Fiscal Year**

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	5,837	5,498	5,615	5,424
Number of Days	64,587	67,131	69,760	76,631
Days Per Client	11	12	12	14
Approved Amount	\$ 48,086,974	\$ 52,936,888	\$ 58,849,838	\$ 60,920,622

*FY 2017-18 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Adults

Psychiatric Hospital Inpatient Services – SD/MC Hospitals

Psychiatric Hospital Inpatient Services – SD/MC Hospitals:

Psychiatric hospital inpatient services include both acute psychiatric hospital inpatient services and administrative day services. Acute psychiatric hospital inpatient services are provided to beneficiaries for whom the level of care provided in a hospital is medically necessary to diagnose or treat a covered mental illness. Administrative day services are hospital inpatient services provided to beneficiaries who were admitted to the hospital for an acute psychiatric hospital inpatient service and the beneficiary's stay at the hospital must be continued beyond the beneficiary's need for acute psychiatric hospital inpatient services due to lack of residential placement options at non-acute residential treatment facilities that meet the needs of the beneficiary.

Psychiatric hospital inpatient services are provided by Short-Doyle / Medi-Cal (SD/MC) hospitals and Fee-for-Service / Medi-Cal (FFS/MC) hospitals. Mental Health Plans (MHPs) claim reimbursement for the cost of psychiatric hospital inpatient services provided by Short-Doyle Medi-Cal hospitals through the Short-Doyle Medi-Cal (SD/MC) claiming system. FFS/MC hospitals claim reimbursement for the cost of psychiatric hospital inpatient services through the Fiscal Intermediary. MHPs are responsible for authorizing psychiatric hospital inpatient services reimbursed through either billing system. For SD/MC hospitals, the daily rate includes the cost of any needed professional services. The FFS/MC hospital daily rate does not include professional services, which are billed separately from the FFS/MC inpatient hospital services via the SD/MC claiming system.

Summary:

The forecast for Psychiatric Inpatient Hospital Services – SD/MC Hospitals indicates an increase in costs and clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 136,294,610	10,196
Actual	FY 2015-16	\$ 120,309,211	9,319
Actual	FY 2016-17	\$ 113,466,732	8,863
Actual	FY 2017-18	\$ 122,157,242	8,822
Actual + Forecast	FY 2018-19	\$ 138,702,251	8,858
Forecast	FY 2019-20	\$ 148,818,399	9,115
Forecast	FY 2020-21	\$ 159,235,687	9,371
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 9a
Adults
Clients Receiving Psychiatric Hospital Inpatient Services - SD/MC Hospitals by
Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 21 and 59 Years of Age	Clients Between 60 and 64 Years of Age	Clients 65 Years of Age and Older
HIS-SDMC	92.7%	5.0%	2.3%
Total Adults	85.4%	8.6%	6.0%

Table 9b
Adults
Clients Receiving Psychiatric Hospital Inpatient Services - SD/MC Hospitals by
Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
HIS-SDMC	28.9%	24.7%	18.8%	6.4%	0.7%	20.5%
Total Adults	34.1%	25.1%	15.1%	6.4%	0.8%	18.7%

Table 9c
Adults
Clients Receiving Psychiatric Hospital Inpatient Services - SD/MC Hospitals by
Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
HIS-SDMC	41.2%	58.8%
Total Adults	50.4%	49.6%

Table 9d
Other Services Received by Adults Receiving
Psychiatric Hospital Inpatient Services - SD/MC Hospitals
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
HOSPITAL INPATIENT	8,822	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	6,094	69.08%
MEDICATION SUPPORT	5,811	65.87%
CRISIS STABILIZATION	5,794	65.68%
CRISIS INTERVENTION	3,987	45.19%
TARGETED CASE MANAGEMENT	3,385	38.37%
FFS-HOSPITAL INPATIENT	1,591	18.03%
ADULT CRISIS RESIDENTIAL	1,349	15.29%
ADULT RESIDENTIAL	222	2.52%
PHF	127	1.44%
DAY REHABILITATION	83	0.94%
DAY TREATMENT INTENSIVE	26	0.29%

Service Metrics:

Table 9e
Adults
Psychiatric Hospital Inpatient Services - SD/MC Hospitals
Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	8,822	100%	\$ 488,220
Mean	\$ 13,847	99%	\$ 97,425
Standard Deviation	\$ 19,745	95%	\$ 48,593
Median	\$ 7,311	90%	\$ 31,400
Mode	\$ 2,924	75%	\$ 15,622
Interquartile Range	\$ 11,572	50%	\$ 7,311
		25%	\$ 4,049

Table 9f
Adults
Psychiatric Hospital Inpatient Services - SD/MC Hospitals Days
Fiscal Year 2017-18

Statistic	Days	Quartile	Days
Number of Clients	8,822	100%	277
Mean	10	99%	88
Standard Deviation	17	95%	35
Median	4	90%	21
Mode	2	75%	10
Interquartile Range	8	50%	4
		25%	2

Table 9g
Adults
Historical Trends
Psychiatric Hospital Inpatient Services - SD/MC Hospitals by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	9,319	8,863	8,822	8,858
Number of Days	96,795	91,718	84,795	90,654
Days Per Client	10	10	10	10
Approved Amount	\$120,309,211	\$113,466,732	\$122,157,242	\$138,702,251

*FY 2017-18 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Adults

Targeted Case Management

Targeted Case Management (TCM):

Targeted case management is a service that assists a beneficiary in accessing needed medical, educational, social, prevocational, vocational, rehabilitative, or other community services. The service activities may include, but are not limited to communication, coordination and referral; monitoring service delivery to ensure beneficiary access to services and the service delivery system; monitoring of the beneficiary's progress; placement services; and plan development. TCM services may be face-to-face or by telephone with the client or significant support persons and may be provided anywhere in the community. Additionally, services may be provided by any person determined by the MHP to be qualified to provide the service, consistent with the scope of practice and state law.

Summary:

The forecast for Targeted Case Management indicates an increase in costs and clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 129,804,324	133,687
Actual	FY 2015-16	\$ 134,325,534	132,257
Actual	FY 2016-17	\$ 141,211,581	127,917
Actual	FY 2017-18	\$ 153,984,498	129,459
Actual + Forecast	FY 2018-19	\$ 162,181,660	133,228
Forecast	FY 2019-20	\$ 174,010,571	136,786
Forecast	FY 2020-21	\$ 186,191,311	140,342
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 10a
Adults
Clients Receiving Targeted Case Management Services by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 21 and 59 Years of Age	Clients Between 60 and 64 Years of Age	Clients 65 Years of Age and Older
TCM	82.9%	9.3%	7.8%
Total Adults	85.4%	8.6%	6.0%

Table 10b
Adults
Clients Receiving Targeted Case Management Services by Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
TCM	34.7%	23.6%	15.5%	6.4%	0.8%	19.0%
Total Adults	34.1%	25.1%	15.1%	6.4%	0.8%	18.7%

Table 10c
Adults
Clients Receiving Targeted Case Management Services by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
TCM	51.0%	49.0%
Total Adults	50.4%	49.6%

Table 10d
Other Services Received by Adults Receiving
Targeted Case Management Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
TARGETED CASE MANAGEMENT	129,459	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	113,864	87.95%
MEDICATION SUPPORT	102,607	79.26%
CRISIS INTERVENTION	24,489	18.92%
CRISIS STABILIZATION	18,102	13.98%
FFS-HOSPITAL INPATIENT	8,939	6.90%
ADULT CRISIS RESIDENTIAL	5,323	4.11%
PHF	3,514	2.71%
HOSPITAL INPATIENT	3,385	2.61%
ADULT RESIDENTIAL	1,206	0.93%
DAY REHABILITATION	361	0.28%
DAY TREATMENT INTENSIVE	129	0.10%

Service Metrics:

Table 10e
Adults
Targeted Case Management Services Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	129,459	100%	\$ 174,093
Mean	\$ 1,189	99%	\$ 12,764
Standard Deviation	\$ 2,889	95%	\$ 5,024
Median	\$ 334	90%	\$ 2,909
Mode	\$ 80	75%	\$ 1,045
Interquartile Range	\$ 917	50%	\$ 334
		25%	\$ 128

Table 10f
Adults
Targeted Case Management Services Minutes
Fiscal Year 2017-18

Statistic	Minutes	Quartile	Minutes
Number of Clients	129,459	100%	23,820
Mean	431	99%	4,221
Standard Deviation	866	95%	1,880
Median	130	90%	1,135
Mode	30	75%	407
Interquartile Range	357	50%	130
		25%	50

Table 10g
Adults
Historical Trends
Targeted Case Management Services by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	132,257	127,917	129,459	133,228
Number of Minutes	54,299,691	53,930,484	55,850,107	59,015,236
Minutes Per Client	411	422	431	443
Approved Amount	\$134,325,534	\$141,211,581	\$153,984,498	\$162,181,660

*FY 2017 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Adults

Therapy and Other Service Activities

Therapy and Other Service Activities (formerly referred to as Mental Health Services):

Individual or group therapies and interventions are designed to provide a reduction of mental disability and restoration, improvement or maintenance of functioning consistent with the goals of learning, development, independent living, and enhanced self-sufficiency. These services are separate from those provided as components of adult residential services, crisis intervention, crisis stabilization, day rehabilitation, or day treatment intensive. Service activities may include, but are not limited to:

1. Assessment - A service activity designed to evaluate the current status of mental, emotional, or behavioral health. Assessment includes, but is not limited to, one or more of the following: mental status determination, analysis of the clinical history, analysis of relevant cultural issues and history, diagnosis, and the use of mental health testing procedures.
2. Plan Development - A service activity that consists of development of client plans, approval of client plans, and/or monitoring and recording of progress.
3. Therapy - A service activity that is a therapeutic intervention focusing primarily on symptom reduction as a means to reduce functional impairments. Therapy may be delivered to an individual or group and may include family therapy at which the client is present.
4. Rehabilitation - A service activity that includes, but is not limited to assistance, improving, maintaining or restoring functional skills, daily living skills, social and leisure skills, grooming and personal hygiene skills, meal preparation skills, and support resources; and/or obtaining medication education.
5. Collateral - A service activity involving a significant support person in the beneficiary's life for the purpose of addressing the mental health needs of the beneficiary in terms of achieving goals of the beneficiary's client plan. Collateral may include, but is not limited to, consultation and training of the significant support person(s) to assist in better utilization of mental health services by the client, consultation and training of the significant support person(s) to assist in better understanding of mental illness, and family counseling with the significant support person(s) in achieving the goals of the client plan. The client may or may not be present for this service activity.

The distribution of use and expenditures of each service activity varies over time with changes in client needs.

Summary:

The forecast for Therapy and Other Service Activities indicates an increase in costs and clients.

Data Composition			
Actual	FY 2014-15	\$ 531,478,881	245,156
Actual	FY 2015-16	\$ 564,211,327	249,496
Actual	FY 2016-17	\$ 663,635,711	244,129
Actual	FY 2017-18	\$ 688,104,526	243,300
Actual + Forecast	FY 2018-19	\$ 757,699,690	254,135
Forecast	FY 2019-20	\$ 812,962,623	263,038
Forecast	FY 2020-21	\$ 869,870,007	271,942
Actual data as of June 30, 2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 11a
Adults
Clients Receiving Therapy and Other Service Activities by Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 21 and 59 Years of Age	Clients Between 60 and 64 Years of Age	Clients 65 Years of Age and Older
Therapy and Other Services	84.4%	9.1%	6.5%
Total Adults	85.4%	8.6%	6.0%

Table 11b
Adults
Clients Receiving Therapy and Other Service Activities by Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
Therapy and Other Services	33.6%	26.3%	14.8%	6.5%	0.7%	18.0%
Total Adults	34.1%	25.1%	15.1%	6.4%	0.8%	18.7%

Table 11c
Adults
Clients Receiving Therapy and Other Service Activities by Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
Therapy and Other Services	52.8%	47.2%
Total Adults	50.4%	49.6%

Table 11d
Other Services Received by Adults Receiving
Therapy and Other Service Activities
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
THERAPY AND OTHER SERVICE ACTIVITIES	243,300	100.00%
MEDICATION SUPPORT	166,577	68.47%
TARGETED CASE MANAGEMENT	113,864	46.80%
CRISIS INTERVENTION	31,780	13.06%
CRISIS STABILIZATION	28,693	11.79%
FFS-HOSPITAL INPATIENT	19,648	8.08%
ADULT CRISIS RESIDENTIAL	6,471	2.66%
HOSPITAL INPATIENT	6,094	2.50%
PHF	3,409	1.40%
ADULT RESIDENTIAL	1,309	0.54%
DAY REHABILITATION	406	0.17%
DAY TREATMENT INTENSIVE	127	0.05%

Service Metrics:

Table 11e
Adults
Therapy and Other Service Activities Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	243,300	100%	\$ 415,686
Mean	\$ 2,828	99%	\$ 26,153
Standard Deviation	\$ 5,819	95%	\$ 11,411
Median	\$ 989	90%	\$ 7,017
Mode	\$ 53	75%	\$ 2,808
Interquartile Range	\$ 2,392	50%	\$ 989
		25%	\$ 416

Table 11f
Adults
Therapy and Other Service Activities Minutes
Fiscal Year 2017-18

Statistic	Minutes	Quartile	Minutes
Number of Clients	243,300	100%	51,303
Mean	830	99%	6,925
Standard Deviation	1,467	95%	3,300
Median	325	90%	2,098
Mode	60	75%	884
Interquartile Range	743	50%	325
		25%	141

Table 11g
Adults
Historical Trends
Therapy and Other Service Activities by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	249,946	244,129	243,300	254,135
Number of Minutes	201,314,816	200,909,759	201,949,291	220,055,472
Minutes Per Client	807	823	830	866
Approved Amount	\$564,211,327	\$663,635,711	\$688,104,526	\$757,699,690

*FY 2017-18 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.

Adults

Psychiatric Hospital Inpatient Services – FFS/MC Hospitals

Psychiatric Hospital Inpatient Services – FFS/MC Hospitals:

Psychiatric hospital inpatient services include both acute psychiatric hospital inpatient services and administrative day services. Acute psychiatric hospital inpatient services are provided to beneficiaries for whom the level of care provided in a hospital is medically necessary to diagnose or treat a covered mental illness. Administrative day services are inpatient hospital services provided to beneficiaries who were admitted to the hospital for an acute psychiatric hospital inpatient service and the beneficiary's stay at the hospital must be continued beyond the beneficiary's need for acute psychiatric hospital inpatient services due to lack of residential placement options at non-acute residential treatment facilities that meet the needs of the beneficiary.

Psychiatric hospital inpatient services are provided by Short-Doyle / Medi-Cal (SD/MC) hospitals and Fee-for-Service / Medi-Cal (FFS/MC) hospitals. Mental Health Plans (MHPs) claim reimbursement for the cost of psychiatric hospital inpatient services provided by Short-Doyle Medi-Cal hospitals through the Short-Doyle Medi-Cal (SD/MC) claiming system. FFS/MC hospitals claim reimbursement for the cost of psychiatric hospital inpatient services through the Fiscal Intermediary. MHPs are responsible for authorizing psychiatric hospital inpatient services reimbursed through either billing system. For SD/MC hospitals, the daily rate includes the cost of any needed professional services. The FFS/MC hospital daily rate does not include professional services, which are billed separately from the FFS/MC inpatient hospital services via the SD/MC claiming system.

Summary:

The forecast for Psychiatric Hospital Inpatient Services – FFS/MC Hospitals indicates an increase in costs and clients.

Data Composition	Fiscal Year	Dollars	Clients
Actual	FY 2014-15	\$ 185,652,125	23,973
Actual	FY 2015-16	\$ 215,506,108	25,874
Actual	FY 2016-17	\$ 242,291,854	27,060
Actual	FY 2017-18	\$ 267,149,433	28,200
Actual + Forecast	FY 2018-19	\$ 287,452,490	30,037
Forecast	FY 2019-20	\$ 307,838,782	31,937
Forecast	FY 2020-21	\$ 328,225,069	33,842
Actual data as of June 30,2019			

Budget Forecast Narrative:

The forecast indicates an increase in dollars and clients through FY 2019-20 and FY 2020-21.

Client Profile Data:

Client profile data is derived from statistical programs and may not exactly match financial reporting due to some overlap with grouping of data categories for analysis purposes. The SFY 2017-18 client tables and the historical trends tables are based upon claims received as of June 30, 2019.

Note:

The following tables utilize data for FY 2017-18. Mental Health Plans (MHP) have one year from the date of service to submit a claim for reimbursement. Consequently, the MHPs still have time to submit timely claims with service dates in fiscal year 2018-19 at the time of this November 2019 Budget Estimate. For this reason, data for FY 2017-18 was used in these tables as all approved claims have been submitted and received representing a full fiscal year.

Table 12a
Adults
Clients Receiving Fee For Service Psychiatric Hospital Inpatient Services by
Age Group
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Clients Between 21 and 59 Years of Age	Clients Between 60 and 64 Years of Age	Clients 65 Years of Age and Older
HIS- FFS	93.5%	4.5%	2.0%
Total Adults	85.4%	8.6%	6.0%

Table 12b
Adults
Clients Receiving Fee For Service Psychiatric Hospital Inpatient Services by
Race/Ethnicity
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	White	Hispanic	Black	Asian / Pacific Islander	Native American	Other
HIS-FFS	31.1%	29.2%	14.5%	4.2%	0.6%	20.4%
Total Adults	34.1%	25.1%	15.1%	6.4%	0.8%	18.7%

Table 12c
Adults
Clients Receiving Fee For Service Psychiatric Hospital Inpatient Services by
Gender
Fiscal Year 2017-18
Data as of 6/30/2019

Groups	Female	Male
HIS-FFS	42.1%	57.9%
Total Adults	50.4%	49.6%

Table 12d
Other Services Received by Adults Receiving
Fee For Service Psychiatric Hospital Inpatient Services
Fiscal Year 2017-18

	Number of Clients	Percent of Clients
FFS-HOSPITAL INPATIENT	28,161	100.00%
THERAPY AND OTHER SERVICE ACTIVITIES	19,648	69.77%
MEDICATION SUPPORT	16,100	57.17%
CRISIS STABILIZATION	10,410	36.97%
CRISIS INTERVENTION	10,373	36.83%
TARGETED CASE MANAGEMENT	8,939	31.74%
ADULT CRISIS RESIDENTIAL	2,338	8.30%
HOSPITAL INPATIENT	1,591	5.65%
PHF	897	3.19%
ADULT RESIDENTIAL	210	0.75%
DAY REHABILITATION	48	0.17%
DAY TREATMENT INTENSIVE	23	0.08%

Service Metrics:

Table 12e
Adults
Fee For Service Psychiatric Hospital Inpatient Services
Approved Amount
Fiscal Year 2017-18

Statistic	Amount	Quartile	Amount
Number of Clients	28,161	100%	\$ 320,839
Mean	\$ 9,476	99%	\$ 78,485
Standard Deviation	\$ 15,079	95%	\$ 34,412
Median	\$ 4,620	90%	\$ 21,162
Mode	\$ 1,980	75%	\$ 9,828
Interquartile Range	\$ 7,376	50%	\$ 4,620
		25%	\$ 2,452

Table 12f
Adults
Fee For Service Psychiatric Hospital Inpatient Services Days
Fiscal Year 2017-18

Statistic	Days	Quartile	Days
Number of Clients	28,161	100%	395
Mean	12	99%	112
Standard Deviation	21	95%	44
Median	6	90%	25
Mode	3	75%	12
Interquartile Range	9	50%	6
		25%	3

Table 12g
Adults
Historical Trends
Fee For Service Psychiatric Hospital Inpatient Services by Fiscal Year

Data Type	2015-16	2016-17	2017-18	2018-19*
Number of Clients	25,874	27,060	28,200	30,037
Number of Days	304,978	330,895	343,125	359,021
Days Per Client	12	12	12	12
Approved Amount	\$215,506,108	\$242,291,854	\$267,149,433	\$287,452,490

*FY 2017-18 numbers are forecasted using actual claims and weighted claim estimates.
Data includes actual claims through June 30, 2019.